

Fill in this information to identify your case:

United States Bankruptcy Court for the  
**Southern District of California**

Case number \_\_\_\_\_ Chapter you are filing under

☒ **Chapter 7**☐ Chapter 11☐ Chapter 12☐ Chapter 13☐ Check if this is an  
Amended filing**OFFICIAL FORM 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy form use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together -- called a joint case -- and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car", the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor w to distinguish between the. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****1. Your full Name**

Write the name that is on your government issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.

About Debtor 1.

**Kodey**

First name

Middle name

**Carvalho**

Last name

Suffix (sr., Jr., II, III)

About Debtor 2 (Spouse only in a Joint Case)

**Michelle**

First name

Middle name

**Carvalho**

Last name

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

**3. Only the last 4 digits of your Social Security number or federal individual Taxpayer Identification number (ITIN)**XXX - XX - **5241**

or

9xx - xx -

XXX - XX - **1606**

or

9xx - xx -

Debtor 1 - **Kodey Carvalho**

Case Number ( if known) \_\_\_\_\_

|   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case)  |
|---|---|---|
| <b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years.</b><br><br>Include trade names and doing business as name | <input checked="" type="checkbox"/> I have not used any business names or EINs<br><br><hr/> Business Name:<br><br><hr/> Business Name:<br><br><hr/> EIN:<br><br><hr/> EIN:<br><br><hr/>   | <input checked="" type="checkbox"/> I have not used any business names or EINs<br><br><hr/> Business Name:<br><br><hr/> Business Name:<br><br><hr/> EIN:<br><br><hr/> EIN:<br><br><hr/>   |
| <b>5. Where you live</b>  | <b>4325 Cassanna Way #602</b><br><br>Number Street<br><br><hr/> <b>Oceanside, CA 92057</b><br><br>City State Zip Code<br><b>San Diego</b><br><br>County<br><b>If your mailing address is different from the one above, fill it in here.</b> Note that the court will send any notice to you at this mailing address<br><br><hr/><br><hr/><br><hr/><br><hr/> | <b>If Debtor 2 lives at a different address:</b><br><br><b>Same</b><br><br>Number Street<br><br><hr/> City State Zip Code<br><b>San Diego</b><br><br>County<br><b>If debtor 2's mailing address is different from yours, fill it in here.</b> Note that the court will send any notices to this mailing address<br><br><hr/><br><hr/><br><hr/><br><hr/> |
| <b>6. Why you are choosing this district to file for bankruptcy.</b>  | Check one<br><br><input checked="" type="checkbox"/> Over the last 180 days before filing this petition I have lived in this district longer than in any other district<br><br><input type="checkbox"/> I have another reason. Explain.<br>(see 28 U.S.C. § 1408.)<br><br><hr/><br><hr/><br><hr/><br><hr/>  | Check one<br><br><input checked="" type="checkbox"/> Over the last 180 days before filing this petition I have lived in this district longer than in any other district<br><br><input type="checkbox"/> I have another reason. Explain.<br>(see 28 U.S.C. § 1408.)<br><br><hr/><br><hr/><br><hr/><br><hr/>  |

Debtor 1 - Kodey Carvalho

Case Number ( if known)

Part 2:

**Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under**

*Check One.* (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for individuals Filing for Bankruptcy(Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ **Chapter 7**

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

8. **How you will pay the fee**

☒ **I will pay the entire fee when I file my Petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individual to Pay The Filing Fee in Installments* (Official Form 103A).

☐ **I request that my fee be waived.** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?**

☒ No

☐ Yes

**No**

|        |       |              |
|--------|-------|--------------|
| Dated: | When: | Case number: |
| Dated: | When: | Case number: |

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

☒ No

☐ Yes

|         |                      |
|---------|----------------------|
| Debtor: | Relationship to you: |
| Dated:  | When:                |
| Dated:  | When:                |
| Debtor: | Relationship to you: |
| Dated:  | When:                |
| Dated:  | When:                |

11. **Do you rent your residence?**

☐ No Go to line 12

☒ Yes Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☒ No. Go to line 12.

☐ Yes. Fill out initial Statement about and Eviction Judgment Against You (Form 101A and file it with the bankruptcy petition).

Debtor 1 - **Kodey Carvalho**

Case Number ( If known)

Part 3:

**Report About Any Businesses You Own as a Sole Proprietor.****12 Are you a sole proprietor of any full - or part - time businesses?**

A sole proprietorship is a business you operate as an individual and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition,

☒ No. Go to Part 4..☐ Yes. Name and location of Business

Name of business, if any

Number Street

City

State

Zip Code

*Check the appropriate box to describe your business.*☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)).☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)).☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))☒ None of the Above.**13 Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D)

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the bankruptcy code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

**Report If You Own or Have Any Hazardous Property or any Property That Need Immediate Attention.****14 Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?**

For example, do you own perishable goods or livestock that must be fed or a building that needs urgent repairs?

☒ No.☐ Yes. What is the hazard? \_\_\_\_\_

If immediate attention is needed, why is it needed? \_\_\_\_\_

Where is the property? \_\_\_\_\_

number Street

City

State

Zip Code

Debtor 1 **- Kodey Carvalho**

Case Number ( If known)

**15 Tell the court whether you****have received a briefing  
about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you can not do so, you are not eligible to file.

If you file any, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1.**

☒ I received a briefing from an approved credit counseling agency within the 10 days before I filed this bankruptcy petition, and I received a certificate of completion.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificated of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of this requirement.

To ask for a 30 day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file the case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

An extension of the 30 day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity** I have a mental illness or mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active Duty** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Souses Only in a Joint Case).**

☒ I received a briefing from an approved credit counseling agency within the 10 days before I filed this bankruptcy petition, and I received a certificate of completion.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificated of completion.

Within 14 days after you file this bankruptcy petition, you UST file a coy of the certificate and payment plan, if any.

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An extension of the 30 day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity** I have a mental illness or mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do

☐ **Active Duty** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 - Kodey Carvalho

Case Number (if known)

Part 6:

**Answer These Questions for Reporting Purposes.****16 What kind of debts do you have?****16a Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."☐ No. Go to line 16b.☒ Yes. Go to line 17.**16b Are your debts primarily business debts?** Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.☒ No. Go to line 16c.☐ Yes. Go to line 17.**16c** State the type of debts you owe that are not consumer debts or business debts.None**17 Are you filing under chapter 7?**☐ No. I am not filing under Chapter 7. Go to line 16.☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?☒ No.☐ Yes.**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?****18 How many creditors do you estimate that you owe?**☒ 1-49☐ 50-99☐ 100-199☐ 1,000-5,000☐ 5,000-10,000☐ 10,000-25,000☐ 15,001-50,000☐ 50,001-100,000☐ More than 100,000**19 How much do you estimate your assets to be worth?**☒ \$0-\$50,000☐ \$50,000-\$100,000☐ \$100,001-\$500,000☐ \$500,001-\$1 million☐ \$1,000,000-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$100,000,000-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion**20 How much do you estimate your liabilities to be?**☒ \$0-\$50,000☐ \$50,000-\$100,000☐ \$100,001-\$500,000☐ \$500,001-\$1 million☐ \$1,000,000-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$100,000,000-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion

Part 7:

**Sign Below****For You**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, 04 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, Specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3671.

x /s/ **Kodey Carvalho**x /s/ **Michelle Carvalho**Debtor 1 - **Kodey Carvalho**Debtor 2 - **Michelle Carvalho**Executed on: **July 22, 2019**Executed on: **July 22, 2019**

Debtor 1

- Kodey Carvalho

Case Number ( if known)

**For your attorney, if you are represented by one.**

**If you are not represented by an attorney, you do not need to file this page.**

I the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11 United States Code, and have explained the relief available under each chapter for which the person is eligible, I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after any inquire that the information in the schedules filed with the petition is incorrect.

\* /s/ **R. Creig Greaves**

Dated: July 22, 2019

**R. Creig Greaves (CA State Bar # 71035)  
Attorney at Law  
110 West C Street #2101  
San Diego, CA 92101  
(619) 234-0033  
(619) 234-3335 = fax  
creig@stopdebtlegal.sdcoxmail.com**

Fill in this information to identify your case:

United States Bankruptcy Court for the  
Southern District of California

Case number \_\_\_\_\_

Chapter you are filing under

☒  
☐  
☐  
☐

Chapter 7

Chapter 11

Chapter 12

Chapter 13

☐ Check if this is an  
Amended filing
**OFFICIAL FORM 106A/B****Schedule A/B: Property**

12/15

In each category, separately list and describe items > List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:

**Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In.****1. Do you own or have any legal or equitable interest in any residence, building, land or similar property?**

- ☒ No. Go to Part 2.  
☐ Yes. Where is the property?

1.1 \_\_\_\_\_  
 Street address, or other description

**What is the property? (Check all that apply)**

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Do not deduct secured claims or exemption. Put  
the amount of any secured claim on Schedule D..  
Creditors Who Have Claims Secured by Property

**Current Value of the  
entire property?****Current value of the  
portion you own?**

\$0

\$0

City State Zip Code

County

**Who has an interest in the property? Check one**

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

Describe the nature of your ownership interest (such  
as fee simple, tenancy by the entireties, or life estate).  
If known.

☐ Check if this is community property.  
(see instruction)

Other information you wish to add about this item, such as local  
property identification number: \_\_\_\_\_

If you own or have more than one, list here.

1.2 \_\_\_\_\_  
 Street address, or other description

**What is the property? (Check all that apply)**

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Do not deduct secured claims or exemption. Put  
the amount of any secured claim on Schedule D..  
Creditors Who Have Claims Secured by Property

**Current Value of the  
entire property?****Current value of the  
portion you own?**

\$0

\$0

City State Zip Code

County

**Who has an interest in the property? Check one**

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

Describe the nature of your ownership interest (such  
as fee simple, tenancy by the entireties, or life estate).  
If known.

☐ Check if this is community property.  
(see instruction)

Other information you wish to add about this item, such as  
property identification number: \_\_\_\_\_



Debtor 1

- Kodey Carvalho

Case Number (if known)

1.3 \_\_\_\_\_  
Street address, or other description

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
County

**What is the property? (Check all that apply)**

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property? Check one**

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

Do not deduct secured claims or exemption. Put the amount of any secured claim on Schedule D.. Creditors Who Have Claims Secured by Property

**Current Value of the entire property?**

\$0

**Current value of the portion you own?**

\$0

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or life estate). If known.**

☐ Check if this is community property. (see instruction)

Other information you wish to add about this item, such as property identification number: \_\_\_\_\_

2 Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... →

\$0

Part 2:

**Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not:** Include any vehicles you own that someone else drives. If you lease a vehicle also report on schedule G *Executory contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No.  
☒ Yes

3.1 Make **2017 Toyota**  
 Model **Rav 4**  
 Year \_\_\_\_\_  
 Mileage **15,000**

Other Information  
 \_\_\_\_\_

**Who has an interest in the property? Check one**

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

☒ Check if this is community property. (see instruction)

Do not deduct secured claims or exemption. Put the amount of any secured claim on Schedule D.. Creditors Who Have Claims Secured by Property

**Current Value of the entire property?**

\$19,620

**Current value of the portion you own?**

\$19,620

If you own or have more than on, describe here.

3.2 Make **2018 Toyota**  
 Model **Camry**  
 Year \_\_\_\_\_  
 Mileage **6,000**

Other Information  
 \_\_\_\_\_

**Who has an interest in the property? Check one**

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

☒ Check if this is community property. (see instruction)

Do not deduct secured claims or exemption. Put the amount of any secured claim on Schedule D.. Creditors Who Have Claims Secured by Property

**Current Value of the entire property?**

\$20,150

**Current value of the portion you own?**

\$20,150

Debtor1

- Kodey Carvalho

Case Number (if known)

3.3

Make

Model

Year

Mileage

Other Information

Who has an interest in the property? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

☐ Check if this is community property.  
 (see instruction)

Do not deduct secured claims or exemption. Put the amount of any secured claim on Schedule D.. Creditors Who Have Claims Secured by Property

Current Value of the entire property?

Current value of the portion you own?

\$

\$

3.4

Make

Model

Year

Mileage

Other Information

Who has an interest in the property? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

☐ Check if this is community property.  
 (see instruction)

Do not deduct secured claims or exemption. Put the amount of any secured claim on Schedule D.. Creditors Who Have Claims Secured by Property

Current Value of the entire property?

Current value of the portion you own?

\$

\$

4.

**Water craft, aircraft, motor homes, ATV's and other recreational vehicles, other vehicles, and accessories.**

Examples: Boats, trailers, motors, personal water craft, fishing vessels, snowmobiles, motorcycle accessories.

- ☐ No.  
☐ Yes

4.1

Make

Model

Year

Other Information

Who has an interest in the property? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

☐ Check if this is community property.  
 (see instruction)

Do not deduct secured claims or exemption. Put the amount of any secured claim on Schedule D.. Creditors Who Have Claims Secured by Property

Current Value of the entire property

Current value of the portion you own?

\$0

\$0

4.2

Make

Model

Year

Other Information

Who has an interest in the property? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another.

☐ Check if this is community property.  
 (see instruction)

Do not deduct secured claims or exemption. Put the amount of any secured claim on Schedule D.. Creditors Who Have Claims Secured by Property

Current Value of the entire property?

Current value of the portion you own?

\$0

\$0

5.

Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... →

\$39,770

Debtor 1

- Kodey Carvalho

Case Number ( If known)

Part 3:

**Describe Your Personal and Household Items.****Do you own or have any legal or equitable interest in any of the following items?**Current value of the  
portion you own?  
Do not deduct secured  
claims or exemptions**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware.

☐ No.  
☒ Yes Describe.....

Furniture, bed, linens, kitchenware, miscellaneous furnishings.

\$2,500

**7. Electronics**

Examples: Televisions and radios, audio, video, stereo, and digital equipment, computers, printer, scanners, music collections, electronic devices including cell phones, cameras, media players, games.

☐ No.  
☒ Yes Describe.....

Television, computer, cell phone

\$800

**8. Collectibles of value.**

Examples: Antiques and figurines, paintings, prints, or other artwork, books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles.

☒ No.  
☐ Yes Describe.....

\$0

**9. Equipment for sports and hobbies.**

Examples: Sports, photographic, exercise, and other hobby equipment, bicycles, pool tables, golf clubs, skis, canoes and kayaks, carpentry tools, musical instruments.

☒ No.  
☐ Yes Describe.....

\$0

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment.

☒ No.  
☐ Yes Describe.....

\$0

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes accessories

☐ No.  
☒ Yes Describe.....

Clothing and shoes

\$600

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver.

☐ No.  
☒ Yes Describe.....

Everyday jewelry

\$500

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses.

☒ No Pets  
☐ Yes Describe.....

\$0

**14. Any other personal and household items you did not already list, including any health aids you did not list.**
☒ No.  
☐ Yes Describe.....

\$0

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here..... →**

\$4,400

Debtor 1

- Kodey Carvalho

Case Number (if known)

Part 4:

**Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following items?**Current value of the  
portion you own?  
Do not deduct secured  
claims or exemptions**16 Cash***Examples:* Money you have in your wallet, in your home, in safe deposit box, and on hand when you file your petition☐

No

☒

Yes.....amount estimated ..... Cash.....

\$100

**17 Deposits of money***Examples:* Checking, savings, or other financial accounts, certificates of deposit, shares in credit unions, brokerage houses and other similar institutions. If you have multiple accounts with the same institution, list each.☐

No

☒

Yes.....

Institution name

17.1 Checking account

Navy FCU

amount estimated

\$1,000

17.2 Checking account

Pacific Marine CU

amount estimated

\$1,000

17.3 Savings account

\$0

17.4 Savings account

\$0

17.5 Certificates of deposit

\$0

17.6 Other financial account

\$0

17.7 Other financial account

\$0

17.8 Other financial account

\$0

17.9 Other financial account

\$0

Total \$2,000

**18 Bonds, mutual funds, or publicly traded stocks.***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts.☒

No

☐

Yes.....

Institution name

\$0

\$0

\$0

Total \$0

**19 Non-publicly traded stock and interests in incorporated and unincorporated businesses, including and interest in an LLC, partnership, and joint venture.**☒

No

☐Yes. Give specific  
information about  
them.....

Name of Property

% of ownership

\$0

\$0

\$0

Total \$0

Debtor 1

- Kodey Carvalho

Case Number (if known)

**20 Government and corporate bonds and other negotiable and nonnegotiable instruments.***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒

No

☐

Yes. Give specific

information about them.....

Issuer name

|       |     |
|-------|-----|
|       | \$0 |
|       | \$0 |
|       | \$0 |
| Total | \$0 |

**21 Retirement or pension accounts.***Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans.☒

No

☐

Yes.....

Type of account

Institution name

|                        |     |
|------------------------|-----|
| 401(k) or similar plan | \$0 |
| Pension plan           | \$0 |
| IRA                    | \$0 |
| Retirement account     | \$0 |
| Keogh                  | \$0 |
| Additional account     | \$0 |
| Additional account     | \$0 |
| Total                  | \$0 |

**22 Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water) telecommunications companies, or others.☐

No

☒

Yes.....

Institution name or individual

|                          |                            |         |
|--------------------------|----------------------------|---------|
| Electric                 |                            | \$0     |
| Gas                      |                            | \$0     |
| Heating oil              |                            | \$0     |
| Security deposit/ rental | Apartment security deposit | \$3,000 |
| Prepaid rent             |                            | \$0     |
| Telephone                |                            | \$0     |
| Water                    |                            | \$0     |
| Rented Furniture         |                            | \$0     |
| Total                    |                            | \$3,000 |

**23 Annuities**☒

No

☐

Yes. Give specific

information about them.....

Issuer name and description.

|  |     |
|--|-----|
|  | \$0 |
|  | \$0 |
|  | \$0 |

Debtor

Kodey Carvalho

Case Number (if known)

**24 Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1)

☒ No☐ Yes..... Institution name and description. Separately file the records of any interests 11 U.S.C. § 541(c)(2)

\$0

\$0

\$0

Total \$0

**25 Trusts, equitable or future interests in property (other than anything listed in Line 1), and rights or powers exercisable for your benefit.**☒ No.☐ Yes Describe.....

\$0

**26 Patents, copyrights, trademarks, trade secrets, and other intellectual property.***Examples:* Internet domain names, websites, proceeds from royalties, and licensing agreements.☒ No.☐ Yes Describe.....

\$0

**27 Licenses, franchises, and other general intangibles.***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses.☒ No.☐ Yes Describe.....

\$0

**Money or property owed to you?**Current value of the portion you own:  
Do not deduct secured claims or exemptions.**28 Tax refunds owed to you.**☒ No.☐ Yes

Describe.....

Give specific information about them, including whether you already filed the returns and tax years

Received tax refund for 2018 prior to filing.

Federal

\$0

State

\$0

Local

\$0

**29 Family Support***Example:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No.☐ Yes - Give specific information

Alimony

\$0

Maintenance

\$0

Support

\$0

Divorce Settlement

\$0

Property Settlement

\$0

**30 Other amounts someone owes you.***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation  
Social Security benefits, unpaid loans you made to someone else☒ No.☐ Yes. Give specific information .....

\$0

Debtor 1

Kodey Carvalho

Case Number (if known)

**31 Interests IN INSURANCE POLICIES***Examples:* Health, disability, or life insurance, health savings account (HSA), credit, homeowners, or renters insurance.☒ No☐ Yes. Name of insurance company  
of each policy and list its value

Company Name

Beneficiary

\$0

\$0

\$0

Total

\$0

**32 Any interest in property that is due you from someone who has died.**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitle to receive property because someone has died.

☒ No.☐ Yes. Describe each item.....

\$0

**33 Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment.***Examples:* Accidents, employment disputes, insurance claims, or rights to sue.☒ No.☐ Yes. Describe each claim.....

\$0

**34 Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pa, vacation pay, workers' compensation  
Social Security benefits, unpaid loans you made to someone else☒ No.☐ Yes. Describe each claim.....

\$0

**35 Any financial assets you did not already list.**☒ No.☐ Yes. Give specific information .....

\$0

**36 Add the collar value of all of your entries from Part 4, including any entries for pages that you have attached for Part 4. Write that number here.....**

→

\$5,100

Part 5

**Describe any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37 Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6  
Yes Go to line 38**Current Value of the  
portion you own**  
Do not deduct secured  
claims or exemptions.**38 Accounts receivable or commissions you already earned**☒ No.☐ Yes. Describe.....

\$0

**39 Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, desks, chairs electronic devices☒ No.☐ Yes. Describe.....

\$0

Debtor 1

- Kodey Carvalho

Case Number (if known)

**40 Machinery, fixtures, equipment, supplies you use in business, and tools of your trade.**

No.



Yes. Describe.....

\$0

**41 Inventory**

No.



Yes. Describe.....

\$0

**42 Interests in partnerships or joint ventures**

No



Yes. y

Name of entity

% of ownership

\$0

\$0

\$0

**43 Customer lists, mailing lists, or other compilations.**

No.



Yes Do your lists include personally identifiable information (as defined in 11 U.S.C. § 191(41A))?



No.



Yes.

Describe.....

\$0

**44 Any business-related property you did not already list.**

No



Yes..... Institution name and description. Separately file the records of any interests 11 U.S.C. § 121(c)

\$0

\$0

\$0

\$0

\$0

\$0

\$0

**45 Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....**

→

\$0

Part 6

**Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

If you own or have an interest in farmland, list it in Part 1.

**46 Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7



Yes Go to line 47

**Current Value of the portion you own**

Do not deduct secured claims or exemptions.

**47 Farm animals***Examples:* Livestock, poultry, farm-raised fish

No.



Yes. Describe.....

\$0



Debtor 1

- Kodey Carvalho

Case Number (if known)

**48 Crops -- either growing or harvested**☒ No.☐ Yes. Describe.....

\$0

**49 Farm and fishing equipment, implements, machinery, fixtures, and tools of trade.**☒ No.☐ Yes. Describe.....

\$0

**50 Farm and fishing supplies, chemicals, and feed.**☒ No.☐ Yes. Describe.....

\$0

**51 Any farm - and commercial fishing-related property you did not already list**☒ No.☐ Yes. Describe.....

\$0

**52 Add the dollar value of all of you entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....** →

\$0

**Part 7 Describe All Property You Own or Have an Interest in That You Did Not List Above****53 Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership.☒ No.☐ Yes. Describe.....

\$0

\$0

\$0

**54 Add the dollar value of all of you entries from Part 7, .....** →

\$0

**Part 8 List the Totals of Each Part of this Form.****55 Part 1: Total real estate, Line 2.....** →

\$0

**56 Part 2: Total vehicles, line 5**

\$39,770

**57 Part 3: Total personal and household items, Line 16**

\$4,400

**58 Part 4: Your financial assets, Line 36**

\$5,100

**59 Part 5: Total business-related property, Line 45**

\$0

**60 Part 6: Total Farm- and fishing-related property Line 52.**

\$0

**61 Part 7: Total other property not listed, Line 54**

\$0

**62 Total personal property. Add lines 56 through 61.....**

\$49,270

Copy Personal Prop →

\$49,270

**63 Total of all property on Schedule AB. Add line 55 and 62.....** →

\$49,270

Fill in this information to identify your case:

United States Bankruptcy Court for the  
**Southern District of California**

Case number \_\_\_\_\_

Chapter you are filing under

☒ **Chapter 7**☐ Chapter 11☐ Chapter 12☐ Chapter 13Check if this is an  
Amended filing**OFFICIAL FORM 106C****Schedule C: The Property You Claim as Exempt**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on **Schedule A/B Property** (Official form 106 A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of **Part 2, Additional Page** as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions -- such as those for health aids, right to receive certain benefits, and tax-exempt retirement funds -- may be unlimited in order in dollar amount. However, if you claim an exemption of 100% of the fair market value under the law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed the amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt.****1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.**

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2).

California Code of Civil Procedure

**703**

Exemptions claimed

**2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below**

| Brief description of the property and line on<br><i>Schedule A/B</i> that lists this property |  | Current value of the<br>portion you own.<br>Copy the value from<br><i>Schedule A/B</i> | Amount of the exemption you claim  | Specific laws that allow exemption                          |
|---|--|--|--|---|
| Brief description   | <b>Household Goods and furnishings</b> | \$2,500  | <input checked="" type="checkbox"/> \$2,500  | California Code of Civil Procedure<br>Section 703.140(b)(5) |
| Line from<br>Schedule A/B   | 6                                      |  | <input checked="" type="checkbox"/> 100% of the fair market value up<br>to any applicable statutory limit. |   |
| Brief description   | <b>Electronics</b>                     | \$800  | <input checked="" type="checkbox"/> \$800  | California Code of Civil Procedure<br>Section 703.140(b)(5) |
| Line from<br>Schedule A/B   | 7                                      |  | <input checked="" type="checkbox"/> 100% of the fair market value up<br>to any applicable statutory limit. |   |
| Brief description   | <b>Clothes and shoes</b>               | \$600  | <input checked="" type="checkbox"/> \$600  | California Code of Civil Procedure<br>Section 703.140(b)(5) |
| Line from<br>Schedule A/B   | 11                                     |  | <input checked="" type="checkbox"/> 100% of the fair market value up<br>to any applicable statutory limit. |   |

**3. Are you claiming a homestead exemption of more than \$160,375**

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No.☒ Yes. **Did you acquire the property covered by the exemption within 1,215 days before you filed this case:**☒ No.☒ Yes.

Debtor1: - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

Part 1: **Additional page**

| Brief description of the property and line on Schedule A/B that lists this property |                                       | Current value of the portion you own.<br>Copy the value from Schedule A/B | Amount of the exemption you claim   | Specific laws that allow exemption |
|---|---------------------------------------|---|---|------------------------------------|
| Brief description   | <b>Jewelry</b>                        | \$600   | <input checked="" type="checkbox"/> \$600   | California Code of Civil Procedure |
| Line from Schedule A/B  | 12                                    |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(4)              |
| Brief description   | <b>Cash</b>                           | \$100   | <input checked="" type="checkbox"/> \$100   | California Code of Civil Procedure |
| Line from Schedule A/B  | 16                                    |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(1) and (5)      |
| Brief description   | <b>Deposits of Money</b>              | \$2,000   | <input checked="" type="checkbox"/> \$4,000   | California Code of Civil Procedure |
| Line from Schedule A/B  | 17                                    |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(1) and (5)      |
| Brief description   | <b>Tax refunds</b>                    | \$0   | <input checked="" type="checkbox"/> \$4,000   | California Code of Civil Procedure |
| Line from Schedule A/B  | 28                                    |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(1) and (5)      |
| Brief description   | <b>Retirement/<br/>Pension/401(k)</b> | \$0   | <input checked="" type="checkbox"/> \$0   | California Code of Civil Procedure |
| Line from Schedule A/B  | 21                                    |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(10)(E)          |
| Brief description   | <b>Machinery / Tools of Trade</b>     | \$0   | <input checked="" type="checkbox"/> \$0   | California Code of Civil Procedure |
| Line from Schedule A/B  | 40                                    |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(6)              |
| Brief description   | <b>Real Property Residence</b>        |   | <input checked="" type="checkbox"/> \$0   | California Code of Civil Procedure |
| Line from Schedule A/B  | 1                                     |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(1) and (5)      |
| Brief description   | <b>Corporation or LLC</b>             | \$0   | <input checked="" type="checkbox"/> \$0   | California Code of Civil Procedure |
| Line from Schedule A/B  | 19                                    |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(1) and (5)      |

Debtor1: - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

Part 1: **Additional page**

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own.<br>Copy the value from Schedule A/B | Amount of the exemption you claim   | Specific laws that allow exemption   |
|---|---|---|--|
| Brief description <b>2017 Toyota Rav4</b>   | 19,620  | <input checked="" type="checkbox"/> \$5,100   | California Code of Civil Procedure Section 703.140(b)(2) used to extent over \$5,100 . See next item if applicable |
| Line from Schedule A/B <u>3</u>   |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. |  |
| Brief description   |   |   | California Code of Civil Procedure   |
| Line from Schedule A/B <u>3</u>   |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | <b>Section 703.140(b)(1) and (5) used for amount over \$5,100</b>  |
| Brief description <b>2018 Toyota Camry</b>  | 20,150  | <input checked="" type="checkbox"/> \$5,000   | California Code of Civil Procedure Section 703.140(b)(5)   |
| Line from Schedule A/B <u>3</u>   |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. |  |
| Brief description   |   | <input checked="" type="checkbox"/> \$0   | California Code of Civil Procedure   |
| Line from Schedule A/B <u>3</u>   |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(5)  |
| Brief description   |   | <input checked="" type="checkbox"/> \$0   | California Code of Civil Procedure   |
| Line from Schedule A/B <u>3</u>   |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(5)  |
| Brief description <b>Security Deposits</b>  | \$3,000   | <input checked="" type="checkbox"/> \$3,000   | California Code of Civil Procedure   |
| Line from Schedule A/B _____  |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(5)  |
| Brief description   | \$0   | <input checked="" type="checkbox"/> \$0   | California Code of Civil Procedure   |
| Line from Schedule A/B _____  |   | <input checked="" type="checkbox"/> 100% of the fair market value up to any applicable statutory limit. | Section 703.140(b)(5)  |
|   |   | \$25,700  |  |
| <b>Total Amount Claimed under § 703.140(b)(1) and (5).....</b>                      |   | <b>\$20,000</b>   |  |
| <b>Total Exemption Reserve under CCP§ 703.140(b)(1) and (5)).....</b>               |   | <b>\$5,340</b>  |  |

Fill in this information to identify your case:

United States Bankruptcy Court for the  
Southern District of California

Case number \_\_\_\_\_

Chapter you are filing under

☒ Chapter 7☐ Chapter 11☐ Chapter 13Check if this is an  
Amended filing**OFFICIAL FORM 106D****Schedule D: Creditors Who Have Claims Secured by Property.**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.



Yes. Fill in all of the information below.

Part 1:

**List All Secured Claims****2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors name.****Column A**  
Amount of Claim.  
Do not deduct  
value of  
collateral**Column B**  
Value of  
collateral  
supports this  
claim**Column C**  
Unsecured  
portion if  
any**2.1** Name, address, city/state, Zip

Describe the property that secured the Claim:

\$33,188

\$19,620

\$13,568

Toyota Motor Credit  
P.O. Box 16159  
Irvine, CA 92713-6159

2017 Toyota RAV 4

As of the date you file, the claim is Check all that apply

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Who owes the Debt? Check one

- ☐
- Debtor 1 only
- 
- ☐
- Debtor 2 only.
- 
- ☒
- Debtor 1 and Debtor 2 only
- 
- ☐
- At least one of the debtors and another
- 
- ☐
- Check if this claim relates to a community debt.

Date debt was incurred 12-17

Nature of the Debt. Check all that apply

- ☒
- An agreement you made (such as mortgage or secured car loan.
- 
- ☐
- Statutory lien (such as tax lien, mechanic's lien
- 
- ☐
- Judgment lien from a lawsuit.
- 
- ☐
- Other ( including right to offset) \_\_\_\_\_

Last 4 digits of account number: 0001

**2.2** Name, address, city/state, Zip

Describe the property that secured the Claim:

\$32,564

\$20,150

\$12,414

Toyota Motor Credit  
P.O. Box 16159  
Irvine, CA 92713-6159

2018 Toyota Camry

As of the date you file, the claim is Check all that apply

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Who owes the Debt? Check one

- ☐
- Debtor 1 only
- 
- ☐
- Debtor 2 only.
- 
- ☒
- Debtor 1 and Debtor 2 only
- 
- ☐
- At least one of the debtors and another
- 
- ☐
- Check if this claim relates to a community debt.

Date debt was incurred 08-18

Nature of the Debt. Check all that apply

- ☒
- An agreement you made (such as mortgage or secured car loan.
- 
- ☐
- Statutory lien (such as tax lien, mechanic's lien
- 
- ☐
- Judgment lien from a lawsuit.
- 
- ☐
- Other ( including right to offset) \_\_\_\_\_

Last 4 digits of account number: 0001

Add the dollar value of your entries in Column A on this page. Write that number here

\$65,752

Fill in this information to identify your case:

United States Bankruptcy Court for the  
**Southern District of California**

Case number \_\_\_\_\_

Chapter you are filing under

- ☒ **Chapter 7**  
☐ Chapter 11  
☐ Chapter 13

Check if this is an  
Amended filing**OFFICIAL FORM 106EF****Schedule EF: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** claims and Part 2 for creditors with **NONPRIORITY** claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G.: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1:

**List All Of Your PRIORITY Unsecured Claims**

1.

**Do any creditors have priority unsecured claims against you?**

No. Go to Part 2.



Yes. Fill in all of the information below.

2.

List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amount, list that claim here and show both priority and nonpriority amounts. As much as possible list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

|     |  | Total Claim | Priority Amount | Nonpriority Amount |
|-----|--|-------------|-----------------|--------------------|
| 2.1 | Name, address, city/state, Zip _____<br><br>Last 4 digits of account number _____  | \$0         | \$0             | \$0                |
|     | <p>When was the debt incurred: _____</p> <p>As of the date you file, the claim is Check all that apply</p> <p><input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of PRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Domestic support obligations.<br/> <input type="checkbox"/> Taxes and certain other debts to government<br/> <input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br/> <input type="checkbox"/> Other: Specify _____</p> <p><b>Who incurred the Debt?</b> Check one</p> <p><input type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only.<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> Check if this claim is community debt.</p> <p>Date debt was incurred _____<br/> Is the claim subject to offset?<br/> <input type="checkbox"/> No.<br/> <input type="checkbox"/> Yes</p> |             |                 |                    |
| 2.2 | Name, address, city/state, Zip _____<br><br>Last 4 digits of account number _____  | \$0         | \$0             | \$0                |
|     | <p>When was the debt incurred: _____</p> <p>As of the date you file, the claim is Check all that apply</p> <p><input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of PRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Domestic support obligations.<br/> <input type="checkbox"/> Taxes and certain other debts to government<br/> <input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br/> <input type="checkbox"/> Other: Specify _____</p> <p><b>Who incurred the Debt?</b> Check one</p> <p><input type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only.<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> Check if this claim is community debt.</p> <p>Date debt was incurred _____<br/> Is the claim subject to offset?<br/> <input type="checkbox"/> No.<br/> <input type="checkbox"/> Yes</p> |             |                 |                    |

Part 2:

**List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**
☐  
☒

No. You have nothing to report in the part. Submit this form to the court with your other schedules.

Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor hold a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claim, fill out the Continuation Page of Part 2.****4.1** Name, address, city/state, ZipLast 4 digits of account number 1582

Total claim

\$5,471

Navy Federal Credit Union  
PO Box 3000  
Merrifield, VA 22119-3000

When was the debt incurred? 12-17**Who incurred the Debt?** Check one

- ☒ Debtor 1 only
- ☐ Debtor 2 only.
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☒ **Check if this claim is community debt.**
- Is the claim subject to offset?
- ☐ No.
- ☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and similar debts
- ☐ Other: Specify \_\_\_\_\_

**4.2** Name, address, city/state, ZipLast 4 digits of account number 0006

\$9,795

Federal Loan Servicing  
PO Box 60610  
Harrisburg, PA 17106-0610

When was the debt incurred? 03-18**Who incurred the Debt?** Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only.
- ☐ Debtor 1 and Debtor 2 only
- ☐ At last on of the debtors and another
- ☒ **Check if this claim is community debt.**
- Is the claim subject to offset?
- ☐ No.
- ☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and similar debts
- ☐ Other: Specify \_\_\_\_\_

**4.3** Name, address, city/state, ZipLast 4 digits of account number 0147

\$916

Pacific Marine Credit Union  
2454 Vista Way  
Oceanside, CA92055

When was the debt incurred? 02-15**Who incurred the Debt?** Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only.
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☒ **Check if this claim is community debt.**
- Is the claim subject to offset?
- ☐ No.
- ☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and similar debts
- ☐ Other: Specify \_\_\_\_\_

Debtor -1 - Kodey Carvalho

Case Number ( if known)

Part 3:

**Your NONPRIORITY Unsecured Claims - Continuation Page**

|            |  |   | Total claim  |
|------------|--|---|--------------|
| <b>4.4</b> | Name, address, city/state, Zip<br><br><div style="background-color: #f0f0f0; padding: 5px;">             Comenity Bank<br/>             PO Box 182273<br/>             Columbus, OH 43218-2273           </div><br><b>Who incurred the Debt?</b> Check one<br><input type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only.<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At lease one of the debtors and another<br><input type="checkbox"/> <b>Check if this claim is community debt.</b><br>Is the claim subject to offset?<br><input type="checkbox"/> No.<br><input type="checkbox"/> Yes                    | Last 4 digits of account number <u>5312</u><br><br>When was the debt incurred? <u>12-17</u><br><br><b>As of the date you file, the claim is:</b> Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and similar debts<br><input type="checkbox"/> Other: Specify _____ | <b>\$386</b> |
| <b>4.5</b> | Name, address, city/state, Zip<br><br><div style="background-color: #f0f0f0; padding: 5px;">             Genesis / Celtic Bank<br/>             268 S State St. Ste.300<br/>             Salt Lake City, UT 84111           </div><br><b>Who incurred the Debt?</b> Check one<br><input type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only.<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At lease one of the debtors and another<br><input type="checkbox"/> <b>Check if this claim is community debt.</b><br>Is the claim subject to offset?<br><input type="checkbox"/> No.<br><input type="checkbox"/> Yes | Last 4 digits of account number <u>9401</u><br><br>When was the debt incurred? <u>09-18</u><br><br><b>As of the date you file, the claim is:</b> Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and similar debts<br><input type="checkbox"/> Other: Specify _____ | <b>\$288</b> |
| <b>4.6</b> | Name, address, city/state, Zip<br><br><div style="background-color: #f0f0f0; padding: 5px;">             Nordstrom Visa<br/>             P.O. Box 78310<br/>             Phoenix, AZ 85062           </div><br><b>Who incurred the Debt?</b> Check one<br><input type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only.<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At lease one of the debtors and another<br><input type="checkbox"/> <b>Check if this claim is community debt.</b><br>Is the claim subject to offset?<br><input type="checkbox"/> No.<br><input type="checkbox"/> Yes                        | Last 4 digits of account number <u>1511</u><br><br>When was the debt incurred? <u>09-18</u><br><br><b>As of the date you file, the claim is:</b> Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and similar debts<br><input type="checkbox"/> Other: Specify _____ | <b>\$238</b> |



Debtor -1 - Kodey Carvalho

Case Number ( if known)

Part 2:

**Your NONPRIORITY Unsecured Claims - Continuation Page**

4.7

Name, address, city/state, Zip

Last 4 digits of account number 2248

Total claim

\$1,141

Patenaude & Felix APC  
4545 Murphy Canyon Rd. FL3  
San Diego, CA 92123

When was the debt incurred? 08-18

Who incurred the Debt? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and similar debts  
☐ Other: Specify \_\_\_\_\_

4.8

Name, address, city/state, Zip

Last 4 digits of account number 4776

\$7,188

Monterey Financial  
4095 Avenida De La Plata  
Oceanside, CA 92056

When was the debt incurred? 04-16

Who incurred the Debt? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and similar debts  
☐ Other: Specify \_\_\_\_\_

4.9

Name, address, city/state, Zip

Last 4 digits of account number 0617

\$4,734

Net Credit  
200 W Jackson Blvd. #2  
Chicago, IL 60606

When was the debt incurred? 08-13

Who incurred the Debt? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and similar debts  
☐ Other: Specify \_\_\_\_\_

Debtor -1 - Kodey Carvalho

Case Number ( If known) \_\_\_\_\_

Part 2:

**Your NONPRIORITY Unsecured Claims - Continuation Page**

410

Name, address, city/state, Zip

Last 4 digits of account number 3493

Total claim

\$3,261

Midland Funding  
8875 Aero Drive Ste. 200  
San Diego, CA 92123

When was the debt incurred? 04-16**Who incurred the Debt?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement  
 or divorce that you did not report as priority  
 claims  
☐ Debts to pension or profit-sharing plans, and similar  
 debts  
☐ Other: Specify \_\_\_\_\_

411

Name, address, city/state, Zip

Last 4 digits of account number 6921

\$3,122

Monterey Financial  
4095 Avenida De La Plata  
Oceanside, CA 92056

When was the debt incurred? 05-15**Who incurred the Debt?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement  
 or divorce that you did not report as priority  
 claims  
☐ Debts to pension or profit-sharing plans, and similar  
 debts  
☐ Other: Specify \_\_\_\_\_

412

Name, address, city/state, Zip

Last 4 digits of account number 4471

\$2,846

Barclays Bank Delaware  
125 S West Street  
Wilmington, DE 19801

When was the debt incurred? 04-15**Who incurred the Debt?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement  
 or divorce that you did not report as priority  
 claims  
☐ Debts to pension or profit-sharing plans, and similar  
 debts  
☐ Other: Specify \_\_\_\_\_

Debtor -1 - Kodey Carvalho

Case Number ( If known)

Part 2:

**Your NONPRIORITY Unsecured Claims - Continuation Page**

413

Name, address, city/state, Zip

Last 4 digits of account number 4097

Total claim

\$1,462

SYNCB - Walmart  
PO Box x 965024  
El Paso, TX 79998

When was the debt incurred? 05-14**Who incurred the Debt?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement  
 or divorce that you did not report as priority  
 claims  
☐ Debts to pension or profit-sharing plans, and similar  
 debts  
☐ Other: Specify \_\_\_\_\_

414

Name, address, city/state, Zip

Last 4 digits of account number 5759

\$1,386

Midland Funding  
8875 Aero Drive Ste. 200  
San Diego, CA 92123

When was the debt incurred? 03-16**Who incurred the Debt?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement  
 or divorce that you did not report as priority  
 claims  
☐ Debts to pension or profit-sharing plans, and similar  
 debts  
☐ Other: Specify \_\_\_\_\_

415

Name, address, city/state, Zip

Last 4 digits of account number 1241

\$1,343

Convergent Outsourcing, Inc.  
800 SW 39<sup>th</sup> Street  
PO Box 9004  
Renton, WA 98057

When was the debt incurred? 07-16**Who incurred the Debt?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement  
 or divorce that you did not report as priority  
 claims  
☐ Debts to pension or profit-sharing plans, and similar  
 debts  
☐ Other: Specify \_\_\_\_\_

Part 2:

**Your NONPRIORITY Unsecured Claims - Continuation Page**

|            |   |  | Total claim    |
|------------|---|--|----------------|
| <b>416</b> | <p>Name, address, city/state, Zip</p> <p><b>AWA Collections</b><br/> <b>PO Box 6605</b><br/> <b>Orange, CA 92613</b></p> <p><b>Who incurred the Debt?</b> Check one<br/> <input type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only.<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> <b>Check if this claim is community debt.</b><br/> Is the claim subject to offset?<br/> <input type="checkbox"/> No.<br/> <input type="checkbox"/> Yes</p>                                    | <p>Last 4 digits of account number <u>0676</u></p> <p>When was the debt incurred? <u>09-16</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.<br/> <input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b><br/> <input type="checkbox"/> Student loans<br/> <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br/> <input type="checkbox"/> Debts to pension or profit-sharing plans, and similar debts<br/> <input type="checkbox"/> Other: Specify _____</p> | <b>\$1,116</b> |
| <b>417</b> | <p>Name, address, city/state, Zip</p> <p><b>SYNCB</b><br/> <b>PO Box 965033</b><br/> <b>Orlando, FL 32896</b></p> <p><b>Who incurred the Debt?</b> Check one<br/> <input type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only.<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> <b>Check if this claim is community debt.</b><br/> Is the claim subject to offset?<br/> <input type="checkbox"/> No.<br/> <input type="checkbox"/> Yes</p>   | <p>Last 4 digits of account number <u>9355</u></p> <p>When was the debt incurred? <u>06-14</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.<br/> <input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b><br/> <input type="checkbox"/> Student loans<br/> <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br/> <input type="checkbox"/> Debts to pension or profit-sharing plans, and similar debts<br/> <input type="checkbox"/> Other: Specify _____</p> | <b>\$993</b>   |
| <b>418</b> | <p>Name, address, city/state, Zip</p> <p><b>Southwest Credit Systems</b><br/> <b>4120 International Pkwy. Ste.1100</b><br/> <b>Carrollton, TX 75007</b></p> <p><b>Who incurred the Debt?</b> Check one<br/> <input type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only.<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> <b>Check if this claim is community debt.</b><br/> Is the claim subject to offset?<br/> <input type="checkbox"/> No.<br/> <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <u>7987</u></p> <p>When was the debt incurred? <u>08-18</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.<br/> <input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b><br/> <input type="checkbox"/> Student loans<br/> <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br/> <input type="checkbox"/> Debts to pension or profit-sharing plans, and similar debts<br/> <input type="checkbox"/> Other: Specify _____</p> | <b>\$846</b>   |



Debtor -1 - Kodey Carvalho

Case Number ( If known)

Part 2:

**Your NONPRIORITY Unsecured Claims - Continuation Page**

422

Name, address, city/state, Zip

Last 4 digits of account number 0009

Total claim

\$72

Mission Federal Credit Union  
P.O. Box 919023  
San Diego, CA 92191

When was the debt incurred? 08-11

Who incurred the Debt? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and similar debts  
☐ Other: Specify \_\_\_\_\_

423

Name, address, city/state, Zip

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

Who incurred the Debt? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and similar debts  
☐ Other: Specify \_\_\_\_\_

424

Name, address, city/state, Zip

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

Who incurred the Debt? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only.  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ **Check if this claim is community debt.**  
 Is the claim subject to offset?  
☐ No.  
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and similar debts  
☐ Other: Specify \_\_\_\_\_

Debtor 1 - Kodey Carvalho

Case Number ( if known)

Part 4:

**Add the Amount for Each Type of Unsecured Claim.**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.  
Add the amounts for each type of unsecured claim.

|                          |    |  | Total claim |     |
|--------------------------|----|--|-------------|-----|
| Total Claims from Part 1 | 6a | Domestic support obligations   | 6a          | \$0 |
|                          | 6b | Taxes and certain other debts you owe the government.                  | 6b          | \$0 |
|                          | 6c | Claims for death or personal injury while you were intoxicated         | 6c          | \$0 |
|                          | 6d | Other. Add all other priority unsecured claims. Writ that amount here. | 6d<br>+     | \$0 |
|                          | 6e | Total: Add lines 6a through 6d.  | 6e          | \$0 |

|                          |    |  | Total claim |          |
|--------------------------|----|--|-------------|----------|
| Total Claims from Part 2 | 6f | Student loans  | 6f          | \$9,795  |
|                          | 6g | Obligations arising out of a separation agreement or divorce that you did not report as priority claims. | 6g          | \$0      |
|                          | 6h | Debts and pension or profit-sharing plans, and other similar debts.                                      | 6h          | \$0      |
|                          | 6i | Other. Add all other nonpriority unsecured claims Write that amount here.                                | 6i          | \$38,025 |
|                          | 6j | Total: Add lines 6f through 6i...  | 6j          | \$47,820 |

Fill in this information to identify your case:

United States Bankruptcy Court for the  
**Southern District of California**

Case number \_\_\_\_\_

Chapter you are filing under

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13Check if this is an  
Amended filing**OFFICIAL FORM 106G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).**

**1. Do you have any executory contracts or unexpired leases?**

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.****Person or company with whom you have the contract or lease****State what the contract or lease is for.****2.1** Name, Address, City/State, Zip**2.2** Name, Address, City/State, Zip**2.3** Name, Address, City/State, Zip**2.4** Name, Address, City/State, Zip**2.5** Name, Address, City/State, Zip



Fill in this information to identify your case:

United States Bankruptcy Court for the  
**Southern District of California**

Case number \_\_\_\_\_

Chapter you are filing under

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13Check if this is an  
Amended filing**OFFICIAL FORM 106H****Schedule H: Your Codebtors**

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

1. **Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)**

☒ No.  
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)**

☐ No  
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No.  
☒ Yes. In which community state or territory did you live: California Fill in the name and current address of that person

Name, address, city and state, zip code.

Current spouses filing jointly

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1. Your codebtor****Column 2: The creditor to whom you owe the debt.  
Check all schedules that apply:**

3.1 Name, address, city and state, zip code

☐  
☐  
☐

Schedule D, Line \_\_\_\_\_

Schedule E/F Line \_\_\_\_\_

Schedule G, Line \_\_\_\_\_

3.2 Name, address, city and state, zip code

☐  
☐  
☐

Schedule D, Line \_\_\_\_\_

Schedule E/F Line \_\_\_\_\_

Schedule G, Line \_\_\_\_\_

3.3 Name, address, city and state, zip code

☐  
☐  
☐

Schedule D, Line \_\_\_\_\_

Schedule E/F Line \_\_\_\_\_

Schedule G, Line \_\_\_\_\_

3.4 Name, address, city and state, zip code

☐  
☐  
☐

Schedule D, Line \_\_\_\_\_

Schedule E/F Line \_\_\_\_\_

Schedule G, Line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1 **Kodey Carvalho**

Debtor 2 **Michelle Carvalho**  
Spouse if filing

United States Bankruptcy Court for the **SOUTHERN** District of **CALIFORNIA**Case number  
(if known)Check if this is an  
Amended filing**Official Form 6I****Schedule I: Your Income**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1 Fill in your employment information.**

If you have more than one job attach a separate page with information about additional employers.

Include employment information about a non-filing spouse unless you are separated.

Include part-time, seasonal or self-employed work.

Occupation should include student or homemaker, if it applies.

**Employment Status**

Employed



Not employed

**Occupation****Assistant Manager**

Employed



Not employed

**Store Manager****Employers name**

Pacific Marine CU

Sunglass Hut

**Employers address**

1278 Rocky Point Drive

2559 El Camino Real

Number Street

Oceanside, Ca 92056

Number Street

Carlsbad, CA 92008

City

State

Zip code

City

State

Zip code

**How long Employed There?**

4 years. / (760) 631-8700 x 2301

3.5 years / (80-8) 971-1061

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space, include your non-filing spouse unless your are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form

**2 List monthly gross wages, salary, and commissions** (before all payroll deductions) If not paid monthly, calculate what a monthly wage would be.

2

**For Debtor 1**

\$4,665

**For Debtor 2 or non-filing spouse**

\$3,159

**3 Estimate and list monthly overtime pay, if any.**

3

\$0

\$0

**4 Calculate gross income. Add line 2 + line 3.**

4

\$4,665

\$3,159

Debtor 1 Kodey Carvalho

Case Number ( if known)

|                       |   | For Debtor 1 | For Debtor 2 or<br>non-filing Spouse |
|-----------------------|---|--------------|--------------------------------------|
| Copy line 4 here..... | 4 | \$4,665      | \$3,159                              |

**5 List all payroll deductions:**

|    |  |    |       |       |
|----|--|----|-------|-------|
| 5a | Payroll taxes and social security payments   | 5a | \$680 | \$407 |
| 5b | Contributions to retirement plans            | 5b | \$0   | \$158 |
| 5c | Required repayments of retirement fund loans | 5c | \$0   | \$0   |
| 5d | Insurance                                    | 5d | \$488 | \$20  |
| 5e | Union Dues                                   | 5e | \$0   | \$0   |
| 5f | Other Deductions: Specify: _____             | 5f | \$0   | \$0   |
| 5g | Other Deductions: Specify: _____             | 5g | \$0   | \$0   |
| 5h | Other Deductions: Specify: _____             | 5h | \$0   | \$0   |

**6 Add the payroll deductions:** Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

6 \$1,168 \$585

**7 Calculate total monthly take-home pay.** Subtract line 6 from line 4.

7 \$3,497 \$2,574

**8 List all other income regularly received:**

8a Net income from rental property and from operating business profession, or farm.

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a \$0 \$0

8b Interest and dividends

8b \$0 \$0

8c Family support payments that you, a non-filing spouse, or a dependent regularly receive. Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c \$0 \$0

8d Unemployment compensation

8d \$0 \$0

8e Social Security

8e \$0 \$0

8f Other government assist Specify: \_

8f \$0 \$0

8g Pension or retirement income

8g \$0 \$0

8h Other monthly income. Specify: \_\_\_\_\_

8h \$0 \$0

**9 Add all other income.** Add lines 8a+8b+8c+8d+8e+8f+8g+8h

9 \$0 \$0

**10 Calculate monthly income.** Add line 7 and line 9.

10 \$3,497 \$2,574 = \$6,071

**11 List all contributions to the expenses that you list in Schedule J that anyone else makes.**

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives

Do not include any amounts already received in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: \_\_\_\_\_

|   |         |
|---|---------|
| + | \$0     |
|   | \$6,071 |

**12 Add the amount in last column of line 10 to the amount in line 11.** The result is the combined monthly income.Write that amount on the *Summary of Schedules* and the *Statistical Summary of Certain Liabilities* and Related data.Combined mo  
Income**13 Do you expect an increase or decrease within the year after you file this form:**

No.



Yes. Explain

**DEBTOR 1****Calculation of Income using Year-To-Date figures****Number of months income used to calculate.****4**

|                                | <b>Year-To-Date Figure</b> | <b>Monthly Equivalent</b> | <b>Amount placed in<br/>Schedule I and<br/>Means Test</b> |
|--------------------------------|----------------------------|---------------------------|---|
| <b>Gross Income</b>            | 18,660.00                  | 4,665.00                  | Line 2  |
| Federal Taxes                  | 1,093.60                   | 273.40                    | Line 5a<br><br>\$680                                      |
| State Taxes                    | 179.59                     | 44.90                     |   |
| Social Security                | 1,036.81                   | 259.20                    |   |
| Medicare                       | 242.48                     | 60.62                     |   |
| SDI                            | 167.10                     | 41.78                     |   |
| Retirement Plan Contribution   |                            | 0.00                      | Line 5b   |
| Retirement Fund Loan Repayment |                            | 0.00                      | Line 5c   |
| Medical Insurance              | 1,816.74                   | 454.19                    | Line 5d<br><br>\$488                                      |
| Dental Insurance               | 121.05                     | 30.26                     |   |
| Vision Insurance               | 13.14                      | 3.29                      |   |
| Union Dues                     |                            | 0.00                      | Line 5e   |
| Other:                         |                            | 0.00                      | Line 5f   |
| Other:                         |                            | 0.00                      | Line 5g   |
| Other:                         |                            | 0.00                      | Line 5h   |
| <b>Net Income</b>              | \$13,989.49                | <b>\$3,497.37</b>         | Line 7  |

**CURRENT MONTHLY INCOME DETAILS FOR THE DEBTOR**

The debtor has been at this job for at least the last 6 months. Income does not vary considerably. The year-to-date income was used from the most recent pay stub available in order to calculate the average monthly income and deductions. These figures are those used for schedule I and the Means Test.

**ATTORNEY CERTIFICATE**

I have reviewed the documentation of the debtor upon which the representations of the debtor are made in this statement.

Dated: July 22, 2019/s/ R. Creig Greaves**R. Creig Greaves**

|                 |   |
|-----------------|---|
| <b>DEBTOR 2</b> | <b>Calculation of Income using Year-To-Date figures</b> |
|-----------------|---|

|   |            |
|---|------------|
| <b>Number of months income used to calculate.</b> | <b>4.6</b> |
|---|------------|

|                                | <b>Year-To-Date Figure</b> | <b>Monthly Equivalent</b> | <b>Amount placed in Schedule I and Means Test</b> |
|--------------------------------|----------------------------|---------------------------|---|
| <b>Gross Income</b>            | 14,530.69                  | 3,158.85                  | Line 2  |
| Federal Taxes                  | 589.10                     | 128.07                    | Line 5a<br><br>\$407                              |
| State Taxes                    | 35.67                      | 7.75                      |   |
| Social Security                | 895.32                     | 194.63                    |   |
| Medicare                       | 209.39                     | 45.52                     |   |
| SDI                            | 144.41                     | 31.39                     |   |
| Retirement Plan Contribution   | 726.54                     | 157.94                    | Line 5b   |
| Retirement Fund Loan Repayment |                            | 0.00                      | Line 5c   |
| Medical Insurance              |                            | 0.00                      | Line 5d<br><br>\$20                               |
| Dental Insurance               | 90.09                      | 19.58                     |   |
| Vision Insurance               |                            | 0.00                      |   |
| Union Dues                     |                            | 0.00                      | Line 5e   |
| Other:                         |                            | 0.00                      | Line 5f   |
| Other:                         |                            | 0.00                      | Line 5g   |
| Other:                         |                            | 0.00                      | Line 5h   |
| <b>Net Income</b>              | <b>\$12,566.71</b>         | <b>\$2,573.95</b>         | Line 7  |

| <b>CURRENT MONTHLY INCOME DETAILS FOR THE DEBTOR</b>   |
|--|
| The debtor has been at this job for at least the last 6 months. Income does not vary considerably. The year-to-date income was used from the most recent pay stub available in order to calculate the average monthly income and deductions. These figures are those used for schedule I and the Means Test. |

| <b>ATTORNEY CERTIFICATE</b>  |
|--|
| I have reviewed the documentation of the debtor upon which the representations of the debtor are made in this statement. |
| Dated: <u>July 22, 2019</u>  |
| <u>/s/ R. Creig Greaves</u><br><b>R. Creig Greaves</b>   |

Fill in this information to identify your case:

Check if this is:

- ☐ Amended filing
- ☐ A supplement showing post petition Chapter 13 expenses as of this date:
- ☐ A separate filing for Debtor 2 because Debtor w maintains a separate household

Debtor 1 **Kodey Carvalho**Debtor 2  
Spouse if filing **Michelle Carvalho**United States Bankruptcy Court for the **SOUTHERN** District of **CALIFORNIA**

Case number

**Official Form B6J****Schedule J: Your Expenses**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

☐

No

☒

Yes. Does Debtor 2 live in a separate household?

☐

No

☒

Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents ?

☐

No

☒

Yes. Fill out this information for each dependent.

Do not list Debtor 1 and Debtor 2

Do not state the dependents names.

Dependents relationship to Debtor 1 or Debtor 2

Dependents age.

Does Dependent live with you?

Son

1 year

☒

Yes

☐

No

☐

Yes

☐

No

☐

Yes

☐

No

☐

Yes

☐

No

☐

Yes

☐

No

3. Do your expenses include expenses of people other than yourself and your dependents?

☒

No

☐

Yes

**Part 2: Estimate your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of the date after the bankruptcy is filed. If this is a supplemental Schedule J, check this box at the top of the form and fill in this applicable date.

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4.

2,550

If not included in line 4:

4a. Real Estate Taxes.....

4a

4b. Property, homeowner's, or renter's insurance.....

4b

4c. Home maintenance, and upkeep expenses.....

4c

4d. Homeowner's association or condominium dues.....

4d

Debtor 1 Kodey Carvalho

Case Number ( if known)

5 **Additional mortgage payments for your residence.** Such as home equity loans.....

5

6 **Utilities**

6a Electricity, heat, natural gas.....

6a

130

6b Water, sewer, garbage collection.....

6b

6c Telephone, cell phone, internet, satellite, and cable services.....

6c

210

6d Other Specify: Telecommunications

6d

50

7 **Food and housekeeping supplies**.....

7.

700

8 **Childcare and children's education costs**.....

.8.

9 **Clothing, laundry, and dry cleaning**.....

9.

100

10 **Personal care products and services**.....

10

80

11 **Medical and dental expenses**.....

11

100

12 **Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments....

12

500

13 **Entertainment, clubs, recreation, newspapers, magazine, and books**.....

13

150

14 **Charitable contributions and religious donations.** .....

14

15 **Insurance**

Do not include insurance deducted from pay or included in lines 4 or 20

15a. Life insurance.....

15a

15b. Health insurance.....

15b

15c. Vehicle insurance.....

15c

205

15d Other insurance. Specify: \_\_\_\_\_

15d

16 **Taxes.** Do not include taxes deducted from pay or included in lines 4 or 20

Specify: \_\_\_\_\_

16

17 **Installment or lease payments:**

17a Car payments for vehicle 1 2017 Toyota Rav4

17a

600

17b Car payments for Vehicle 2 2018 Toyota Camry

17b

600

17c Student loan payments

17c

100

17d Other: Specify: \_\_\_\_\_

17d

17e Other: Specify: \_\_\_\_\_

17e

18 **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I*, Your Income (official Form B6I).**

18

19 **Other payments that you make to support others who do not live with you**

19

Specify: \_\_\_\_\_

20 **Other real property expenses not included in lines 4 or 5 of this form or on Schedule K: Your income (Official Form 6I)**

20a Mortgages on other property.....

20a

20b Real estate taxes.....

20b

20c Property, homeowner's or renter's insurance.....

20c

20d Maintenance, repair, and upkeep expenses.....

20d

20e Homeowner's association or condominium dues.....

Debtor 1 **Kodey Carvalho**

Case Number ( if known)

21 **Other:** Specify: \_\_\_\_\_

21

22 **Your monthly expenses.** Add lines 4 through 21  
 The result is your monthly expenses.....

6,075

23 **Calculate your monthly net income.**

23a Copy line 12 (your combined monthly income) from Schedule I.....

6,071

23b Copy your monthly expenses from line 22 above.....

6,075

23c Substrate your monthly expenses from your monthly income  
 The result is your monthly net income

(4)

24 **Do you expect an increase or decrease in your expenses with the year after your file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?



No



Yes



Debtor 1 **Kodey Carvalho**

Debtor 2 **Michelle Carvalho**

United States Bankruptcy Court for the  
Southern District of California

Case number \_\_\_\_\_ Chapter you are filing under \_\_\_\_\_



Check if this is an  
Amended Filing

## OFFICIAL FORM 106SUM

### Summary of Your Assets and Liabilities and Certain Statistical Information.

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets.

|     |  | Your Assets<br>Value of what you own |
|-----|--|--------------------------------------|
| 1.  | Schedule A/B. <i>Property</i> (Official Form 106A/B)                 |                                      |
| 1a. | Copy line 55. Total real estate from <i>Schedule A/B</i> .....       | \$0                                  |
| 1b. | Copy line 62. Total personal property from <i>Schedule A/B</i> ..... | \$49,270                             |
| 1c. | Copy line 63. Total of all property on <i>Schedule A/B</i> .....     | \$49,270                             |

#### Part 2: Summarize Your Liabilities.

|                               |   | Your Liabilities<br>Value of what you own |
|-------------------------------|---|---|
| 2.                            | Schedule D: <i>Creditors Who have Claims Secured by Property</i> (Official Form 106D)                                       |   |
| 2a.                           | Copy the total you listed in Column A. Amount of claim, at the bottom of the last page of Part 1 of <i>Schedule D</i> ..... | \$65,752                                  |
| 3.                            | Schedule E/F. <i>Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)   |   |
| 3a.                           | Copy the total claims from Part 1 ( <b>priority unsecured claims</b> ) from line 6j of <i>Schedule E/F</i> .....            | \$0                                       |
| 3b.                           | Copy the total claims from Part 2 ( <b>nonpriority unsecured claims</b> ) from line 6j of <i>Schedule E/F</i> +             | \$47,820                                  |
| <b>Your total liabilities</b> |   | \$113,572                                 |

#### Part 3: Summarize Your Income and Expenses.

|  |   |          |
|--|---|----------|
| 4.                                     | Schedule I: <i>Your Income</i> (Official Form 106I)                       |          |
|  | Copy your combined monthly income from line 12 of <i>Schedule I</i> ..... | \$6,071  |
| 5.                                     | Schedule J: <i>Your Expenses</i> (Official Form 106J)                     |          |
|  | Copy your monthly expenses from line 22c of <i>Schedule J</i> .....       | \$6,075  |
| <b>TOTAL OF ALL EXEMPTIONS CLAIMED</b> |   | \$25,700 |

Part 4:

**Answer These Questions for Administrative and Statistical Records.**6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes.

7. **What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal family, or household purpose" 11 U.S.C. § 101(6). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the Statement of Your Current Monthly Income.** Copy your total current monthly income from Official Form 122A-1 Line 11, **OR** Form 122b Line 11, **OR** Form 122c-1 Line 14.

\$7,824

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F.**

|  | Total Claim    |
|--|----------------|
| From Part 4 on Schedule E/F, copy the following.   |                |
| 9a. Domestic Support Obligations (Copy line 6a.)   | \$0            |
| 9b. Taxes and certain other debts you owe the government (Copy line 6b).   | \$0            |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c)   | \$0            |
| 9d. Student Loans (Copy line 6f.)  | \$9,795        |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0            |
| 9f. Debts to pension or profit-sharing plans, and other similar debts (Copy line 6h.)  | \$0            |
| 9g. <b>Total. Add lines 9a through 9f.</b>   | <b>\$9,795</b> |

Fill in this information to identify your case:

Debtor 1 **Kodey Carvalho**Debtor 2 **Michelle Carvalho**United States Bankruptcy Court for the  
**Southern District of California**

Case number \_\_\_\_\_ Chapter you are filing under \_\_\_\_\_

Check if this is an  
Amended Filing**OFFICIAL FORM 106Dec****Declaration About an Individual Debtor's Schedules**

12/15

**If two married people are filing together, both are equally responsible for supplying correct information.****You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connections with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years or both. 18 U.S.C. §§ 162, 1341, 1519, and 3571.****Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?



No.



Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).**Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.**\* /s/ **Kodey Carvalho**Signature of Debtor 1: **Kodey Carvalho**Executed on: **July 22, 2019**\* /s/ **Michelle Carvalho**Signature of Debtor 2 - **Michelle Carvalho**Executed on: **July 22, 2019**

Fill in this information to identify your case:

Debtor 1 **Kodey Carvalho**Debtor 2 **Michelle Carvalho**United States Bankruptcy Court for the  
**Southern District of California**

Case number \_\_\_\_\_ Chapter you are filing under \_\_\_\_\_

Check if this is an  
Amended Filing**OFFICIAL FORM 107****Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before.****1. What is your current marital status?**

Married.



Not married.

**2. During the last 3 years, have you lived anywhere other than where you live now? Present address 1 year.**

No.



Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1  
lived there

Debtor 2:

Dates Debtor 2  
lived there

Number, Street, City, State

4470 Silver Birch Way,  
Oceanside, CA 92057

From 2014

To 2018

☐ Same as Debtor 1.

Number, Street, City, State

☐ Same as Debtor 1

From \_\_\_\_\_

To \_\_\_\_\_

☐ Same as Debtor 1.

Number, Street, City, State

☐ Same as Debtor 1

From \_\_\_\_\_

To \_\_\_\_\_

**3. Within the Last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No.



Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor1 :

- Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

Part 2:

**Explain the Sources of Your Income.****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.-  
If you are filing a joint case and you have income that you receive together, list it only once under Debtor1.

☐

No.

☒

Yes. Fill in the details.

|  | Debtor 1  |  | Debtor 2  |   |
|--|---|--|---|---|
|  | Source of Income<br>Check all that apply  | Gross Income<br>(before deductions and exclusions) | Sources of Income<br>Check all that apply   | Gross Income<br>before deductions and exclusions) |
| <b>From January 1 of current year until the date you filed for bankruptcy:</b> | <input checked="" type="checkbox"/> Wages, commissions<br><input type="checkbox"/> Bonuses, tips<br><input type="checkbox"/> Operating a business | \$42,000   | <input checked="" type="checkbox"/> Wages, commissions<br><input type="checkbox"/> Bonuses, tips<br><input type="checkbox"/> Operating a business | \$20,000  |
| <b>For last Calendar year:<br/>(January 1, to December 31 2017)</b>            | <input checked="" type="checkbox"/> Wages, commissions<br><input type="checkbox"/> Bonuses, tips<br><input type="checkbox"/> Operating a business | 66,834   | <input checked="" type="checkbox"/> Wages, commissions<br><input type="checkbox"/> Bonuses, tips<br><input type="checkbox"/> Operating a business | Combined with debtor                              |
| <b>For last Calendar year before that<br/>(January 1, to December 31 2016)</b> | <input checked="" type="checkbox"/> Wages, commissions<br><input type="checkbox"/> Bonuses, tips<br><input type="checkbox"/> Operating a business | 65,000   | <input checked="" type="checkbox"/> Wages, commissions<br><input type="checkbox"/> Bonuses, tips<br><input type="checkbox"/> Operating a business | Combined with debtor                              |

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony, child support; Social Security, unemployment and other public benefit payments; pensions; rental income; interest, dividends, money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that your received together, list it only once under Debtor 1.

List each source and the gross income from source separately. Do not include income that you listed in line 4.

☒

No.

☐

Yes. Fill out the details.

|  | Debtor 1                           |   | Debtor 2                            |  |
|--|------------------------------------|---|-------------------------------------|--|
|  | Source of Income<br>Describe below | Gross Income from each source<br>(before deductions and exclusions) | Sources of Income<br>Describe below | Gross Income from each source<br>before deductions and exclusions) |
| <b>From January of current year until the date you filed for bankruptcy:</b>   |                                    |   |                                     |  |
| <b>For last Calendar year:<br/>(January 1, to December 31 2017)</b>            |                                    |   |                                     |  |
| <b>For last Calendar year before that<br/>(January 1, to December 31 2016)</b> |                                    |   |                                     |  |

Debtor1 :

- Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

Part 3:

**List Certain Payments You Made Before You Filed for Bankruptcy.**

6.

**Are either Debtor1's or Debtor2's debts primarily consumer debts?**

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose". During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,426\* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,426\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.** During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

|                                     | Dates of payment | Total amount paid | Amount you still owe | Was this payment for   |
|-------------------------------------|------------------|-------------------|----------------------|--|
| Creditors Name, address, city/state |                  | \$0               | \$0                  | <input type="checkbox"/> Mortgage<br><input type="checkbox"/> Car<br><input type="checkbox"/> Credit card<br><input type="checkbox"/> Loan payment<br><input type="checkbox"/> Suppliers<br><input type="checkbox"/> Other _____ |
|                                     |                  |                   |                      |  |
|                                     |                  |                   |                      |  |
| Creditors Name, address, city/state |                  | \$0               | \$0                  | <input type="checkbox"/> Mortgage<br><input type="checkbox"/> Car<br><input type="checkbox"/> Credit card<br><input type="checkbox"/> Loan payment<br><input type="checkbox"/> Suppliers<br><input type="checkbox"/> Other _____ |
|                                     |                  |                   |                      |  |
|                                     |                  |                   |                      |  |
| Creditors Name, address, city/state |                  | \$0               | \$0                  | <input type="checkbox"/> Mortgage<br><input type="checkbox"/> Car<br><input type="checkbox"/> Credit card<br><input type="checkbox"/> Loan payment<br><input type="checkbox"/> Suppliers<br><input type="checkbox"/> Other _____ |
|                                     |                  |                   |                      |  |
|                                     |                  |                   |                      |  |

Debtor1 : - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities, and any managing agent, including on for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.



No.



Yes. List all payments to an insider.

|  | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|--|------------------|-------------------|----------------------|-------------------------|
| Insider's name, address, city/state, zip |                  | \$0               | \$0                  |                         |
|  |                  |                   |                      |                         |
|  |                  |                   |                      |                         |
| Insider's name, address, city/state, zip |                  | \$0               | \$0                  |                         |
|  |                  |                   |                      |                         |
|  |                  |                   |                      |                         |

8. **Within 1 year before you filed for bankruptcy, did you make a payment or transfer any property on account of a debt that benefitted an insider?**

Include payment on debts guaranteed or cosigned by and insider.



No.



Yes. List all payments to an insider.

|  | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment<br>Include creditor's name |
|--|------------------|-------------------|----------------------|--|
| Insider's name, address, city/state, zip |                  | \$0               | \$0                  |  |
|  |                  |                   |                      |  |
|  |                  |                   |                      |  |
| Insider's name, address, city/state, zip |                  | \$0               | \$0                  |  |
|  |                  |                   |                      |  |
|  |                  |                   |                      |  |

Debtor 1 : - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

Part 4:

**Identify Legal Actions, Repossession, and Foreclosures.**

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action or administrative proceeding?** List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications and contract disputes.

☐

No.

☒

Yes. Fill in the details.

Case Title

Capital One vs. Carvalho

Case File No.

Nature of the case

Lawsuit for money

Court or agency

Court name, address, city and state

San Diego Suuperior

Status of this case

- ☐ Pending  
☐ On appeal  
☐ Concluded

Case Title

Case File No.

Nature of the case

Court name, address, city and state

Status of this case

- ☐ Pending  
☐ On appeal  
☐ Concluded

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seize, or levied?** Check all that apply and fill in the details below.

☒

No.

☐

Yes. Fill in the detail

Creditor's name, address, city, state, zip code

Describe the property

Date

Value of the Property

\$0

- ☐ Property was repossessed  
☐ Property was foreclosed  
☐ Property was Garnished  
☐ Property was attached, seized, or levied.

Creditor's name, address, city, state, zip code

Describe the property

Date

Value of the Property

\$0

- ☐ Property was repossessed  
☐ Property was foreclosed  
☐ Property was Garnished  
☐ Property was attached, seized, or levied.

Creditor's name, address, city, state, zip code

Describe the property

Date

Value of the Property

\$0

- ☐ Property was repossessed  
☐ Property was foreclosed  
☐ Property was Garnished  
☐ Property was attached, seized, or levied.



Debtor1 : - **Kodey Carvalho**

Case Number ( if known) \_\_\_\_\_

- 11 Within **90 days** before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amount from your accounts or refuse to make a payment because you owed a debt?

☒

No.

☐

Yes. Fill in the detail

| Creditor's name, address, city / state | Describe the action the creditor took | Date Action was taken | Amount |
|--|---------------------------------------|-----------------------|--------|
|  |                                       |                       | \$0    |
|  |                                       |                       |        |

Last 4 digits of account number \_\_\_\_\_

- 12 Within **1 year** before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☒

No.

☐

Yes.

Part 5: **List Certain Gifts and Contributions.**

- 13 Within **2 years** before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒

No.

☐

Yes.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave gifts | Value |
|--|--------------------|----------------------|-------|
| Name, address, city / state /zip                       |                    |                      | \$0   |
|  |                    |                      | \$0   |

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave gifts | Value |
|--|--------------------|----------------------|-------|
| Name, address, city / state /zip                       |                    |                      | \$0   |
|  |                    |                      | \$0   |

Debtor1 : **- Kodey Carvalho**

Case Number ( if known) \_\_\_\_\_

14 **Within 2 years** before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 to any charity?**No.****Yes.****Gifts or contributions to charities that total more than \$600**

Name, address, city / state / zip

**Describe what you contributed****Dates you contributed****Value**

\$0

\$0

**Part 6: List Certain Losses.**15 **Within 2 years** before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**No.****Yes.****Describe the property you lost and how the loss occurred.****Describe any insurance coverage for the loss.**

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property

**Date of your loss.****Value of property lost.**

\$0

**Part 7: List Certain Payments or Transfers.**16 **Within 1 year** before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

**No.****Yes.** Fill in the details.**Description and value of any property transferred****Dates of transfer****Amount of payment**

Name of person paid, address, city/state

\$0

\$0

Debtor1 : - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

| Name of person paid, address, city/state | Description and value of any property transferred | Dates of transfer | Amount of payment |
|--|---|-------------------|-------------------|
|  |   |                   | \$0               |
|  |   |                   | \$0               |

17

**Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you promises to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

☒
**No.****Yes.** Fill in the details.

| Name of person paid, address, city/state | Description and value of any property transferred | Dates of transfer | Amount of payment |
|--|---|-------------------|-------------------|
|  |   |                   | \$0               |
|  |   |                   | \$0               |

18

**Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

☒
**No.****Yes.** Fill in the details.

| Person who received transfer / address | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|--|---|--|------------------------|
|  |   |  | _____                  |
|  |   |  | _____                  |

Debtor 1 : - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

19 Within **10 years** before you filed for bankruptcy, did you transfer any property to a self-certified trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

☐ No.  
☐ Yes. Fill in the details.

Description and value of the property transferred

Date transfer  
was made

Name of trust:

Part 8: **List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units.**

20. Within **1 year** before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts, certificates of deposit, shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☐ No.  
☐ Yes. Fill in the details.

Last 4 digits of account number

Type of account or  
instrument.Date account was  
closed, sold, moved,  
or transferredLast balance before  
closing or transfer

Name Financial Institution &amp; address

XXXX- \_\_\_\_\_

☐ Checking  
☐ Savings  
☐ Money Market  
☐ Brokerage  
☐ Other \_\_\_\_\_

\_\_\_\_\_

\$0

Last 4 digits of account number

Type of account or  
instrument.Date account was  
closed, sold, moved,  
or transferredLast balance before  
closing or transfer

Name Financial Institution &amp; address

XXXX- \_\_\_\_\_

☐ Checking  
☐ Savings  
☐ Money Market  
☐ Brokerage  
☐ Other \_\_\_\_\_

\_\_\_\_\_

\$0

21. Do you now have, or did you have within **1 year** before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☐ No.  
☐ Yes. Fill in the details.

Who else had access to it?

Describe the contents

Do you still  
have it?

Financial Institution name &amp; address

Name, numbers, city/street, zip

☐ No.  
☐ Yes

Debtor 1 : - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

22 **Have you stored property in a storage unit or place other than your home within **1 year** before you filed for bankruptcy?**

☐   
 ☐

No.

Yes. Fill in the details.

|                                      | Who else had access to it?      | Describe the contents | Do you still have it?  |
|--------------------------------------|---------------------------------|-----------------------|--|
| Financial Institution name & address | Name, numbers, city/street, zip |                       | <input type="checkbox"/> No.<br><input type="checkbox"/> Yes |

Part 9: **Identify Property you Hold or Control for Someone Else.**

23 **Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

☐   
 ☐

No.

Yes. Fill in the details.

|                                   | Where is the property?   | Describe the property | Value |
|-----------------------------------|--------------------------|-----------------------|-------|
| Owners name, address, city, state | Number, city/street, zip |                       |       |

Part 10: **Give Details About Environmental Information.**

For the purpose of Part 10, the following apply:

- *Environmental law* means any federal, state, or local statute, or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium including statutes or regulations controlling the cleanup of these substances, wastes, or material.
  - *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize, including disposal sites.
  - *Hazardous material* means anything an environmental law defines as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.
- Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. **Has any governmental unit notified you that you may be liable or potentially liable under or in violation of environmental law?**

☐   
 ☐

No.

Yes. Fill in the details.

|                        | Governmental unit | Environmental law, if you know it. | Date of notice |
|------------------------|-------------------|------------------------------------|----------------|
| Name of site / address |                   |                                    | _____          |

Debtor 1 : - Kodey Carvalho

Case Number ( if known) \_\_\_\_\_

25. **Have you notified any governmental unit of any release of hazardous material?**
☐ No.  
☐ Yes. Fill in the details.

| Name of site / address | Governmental unit | Environmental law, if you know it. | Date of notice |
|------------------------|-------------------|------------------------------------|----------------|
|                        |                   |                                    | _____          |

26. **Have you been a party to any judicial or administrative proceeding under any environmental law? Include settlements and Orders.**
☐ No.  
☐ Yes. Fill in the details.

| Name of site / address | Court or agency | Nature of the case. | Status of case   |
|------------------------|-----------------|---------------------|--|
|                        |                 |                     | <input type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |

Part 11: **Give Details About Your Business or Connections to Any Business.**27. **Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time.  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP).  
☐ A partner in a partnership.  
☐ An officer, director, or managing executive of a corporation.  
☐ An owner of at least 5% of the voting or equity securities of a corporation.  
☐ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

|  |                                     |   |
|--|-------------------------------------|---|
| Business Name, address, city/state/zip | Describe the nature of the business | Employer Identification number<br>Do not include Social Security Number or ITIN |
|  |                                     | EIN: _____  |
|  | Name of Accountant or Bookkeeper    | Dates business existed.   |
|  |                                     | From: _____ To: _____   |
| Business Name, address, city/state/zip | Describe the nature of the business | Employer Identification number<br>Do not include Social Security Number or ITIN |
|  |                                     | EIN: _____  |
|  | Name of Accountant or Bookkeeper    | Dates business existed.   |
|  |                                     | From: _____ To: _____   |

Debtor 1 :

**- Kodey Carvalho**

Case Number ( if known) \_\_\_\_\_

|  |                                     |   |
|--|-------------------------------------|---|
| Business Name, address, city/state/zip<br><br> | Describe the nature of the business | Employer Identification number<br>Do not include Social Security Number or ITIN |
|  | Name of Accountant or Bookkeeper    | Dates business existed.<br>From: _____ To: _____                                |

**Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business/ Include all financial institutions, creditors, or other parties.**

☐ No.  
☐ Yes. Fill in the details.

Name, address, city, state, zip

Date Issued. Month / day / year

Part 12:

**Sign Below.**

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000 or imprisonment for up to 20 years, or both.

\* /s/ Kodey Carvalho

\* /s/ Michelle Carvalho

Signature of debtor 1

Signature of debtor 2

**Kodey Carvalho****Michelle Carvalho**

Date: July 22, 2019

Date: July 22, 2019

**Did you attach additional pages to Your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?**

☐ No.  
☐ Yes

**Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?**

☐ No.  
☐ Yes. Name of person \_\_\_\_\_

Attach the Bankruptcy Petition Preparer's Notice.  
Declaration and Signature (Official Form 119)

United States Bankruptcy Court for the  
Southern District of California

Case number \_\_\_\_\_

Chapter you are filing under

☒  
☐  
☐  
☐
Chapter 7  
Chapter 11  
Chapter 12  
Chapter 13
☐ Check if this is an  
Amended filing
**OFFICIAL FORM 108****Statement of Intention for Individuals Filing Under Chapter 7.**

12/15

- 1 If you are an individual filing under chapter 7, you must fill out this form if:
- creditors have claims secured by our property, or
  - you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form. If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date this form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Have Secured Claims.**

1. For any creditors that you listed in Part 1 of *Schedule D, Creditors Who Have Claims Secured by Property* (Official Form 106D) fill in the information below.

| Identify the creditor and the property that is collateral   | What do you intend to do with the property that secured the debt?  | Did you claim the property as exempt on Schedule ?C?                     |
|---|--|--|
| <b>Creditor's name</b> Toyota Financial<br><br><b>Description of property securing debt</b> 2017 Toyota Rav 4 | <input type="checkbox"/> Surrender the property.<br><input type="checkbox"/> Retain the property and redeem it.<br><input checked="" type="checkbox"/> Retain the property and enter into a<br><i>Reaffirmation Agreement.</i><br><input type="checkbox"/> Retain the property and (explain) _____ | <input type="checkbox"/> No.<br><input checked="" type="checkbox"/> Yes. |
| <b>Creditor's name</b> Toyota financial<br><br><b>Description of property securing debt</b> 2018 Toyota Camry | <input type="checkbox"/> Surrender the property.<br><input type="checkbox"/> Retain the property and redeem it.<br><input checked="" type="checkbox"/> Retain the property and enter into a<br><i>Reaffirmation Agreement.</i><br><input type="checkbox"/> Retain the property and (explain) _____ | <input type="checkbox"/> No.<br><input checked="" type="checkbox"/> Yes. |
| <b>Creditor's name</b><br><br><b>Description of property securing debt</b>                                    | <input type="checkbox"/> Surrender the property.<br><input type="checkbox"/> Retain the property and redeem it.<br><input type="checkbox"/> Retain the property and enter into a<br><i>Reaffirmation Agreement.</i><br><input type="checkbox"/> Retain the property and (explain) _____            | <input type="checkbox"/> No.<br><input type="checkbox"/> Yes.            |
| <b>Creditor's name</b><br><br><b>Description of property securing debt</b>                                    | <input type="checkbox"/> Surrender the property.<br><input type="checkbox"/> Retain the property and redeem it.<br><input type="checkbox"/> Retain the property and enter into a<br><i>Reaffirmation Agreement.</i><br><input type="checkbox"/> Retain the property and (explain) _____            | <input type="checkbox"/> No.<br><input type="checkbox"/> Yes.            |



Debtor 1 - **Kodey Carvalho**

Case Number ( if known) \_\_\_\_\_

Part 2:

**List Your Unexpired Personal Property Leases.**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G) fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases****Will the lease be assumed?**Lessor's  
name
☐ No.  
☐ Yes.
Description of leased  
property.Lessor's  
name
☐ No.  
☐ Yes.
Description of leased  
property.Lessor's  
name
☐ No.  
☐ Yes.
Description of leased  
property.Lessor's  
name
☐ No.  
☐ Yes.
Description of leased  
property.Lessor's  
name
☐ No.  
☐ Yes.
Description of leased  
property.Lessor's  
name
☐ No.  
☐ Yes.
Description of leased  
property.

Part 3:

**Sign Below.**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

\* /s/ Kodey Carvalho

Signature of debtor 1

**Kodey Carvalho**Date: July 22, 2019\* /s/ Michelle Carvalho

Signature of debtor 2

**Michelle Carvalho**Date: July 22, 2019

**Fill in this information to identify your case**

Debtor 1 **Kodey Carvalho**

Debtor 2  
Spouse if filing **Michelle Carvalho**

United States Bankruptcy Court, **SOUTHERN** District of **CALIFORNIA**

Case number

**Check one only as directed in lines 1, 2, 3, or 17:**

- According to the calculations required by this statement
- ☒ 1. There is no presumption of abuse
- ☐ 2. The presumption of abuse is determined by Form 22-A2
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later
- ☐ Check if this is an amended filing

**Official Form 22A-1****Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from presumption of Abuse* Under § 707(b)(2) Official form 122A-1 Supp) with this form.

**Part 1: Calculate Your Current Monthly Income**1 **What is your marital and filing Status?** Check one only.

- ☐ **Not married.** Fill out Column A, lines 5-15.
- ☒ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 5-14
- ☐ **Married and your spouse is NOT filing with you.** You and your spouse are:
- ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 5-14.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 5-14, do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B)

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, you are filing on September 15, the 6 month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

|   |  | Column A<br>For you | Column B<br>Debtor 2 |
|---|--|---------------------|----------------------|
| 2 | <b>Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions): | \$4,665             | \$3,159              |
| 3 | <b>Alimony and maintenance payments.</b>   | \$0                 | \$0                  |
| 5 | <b>Net income from operating a business, profession, or farm</b>   |                     |                      |
|   | Gross receipts (before all deductions)   | \$0                 | \$0                  |
|   | Ordinary and necessary operating expenses  |                     |                      |
|   | Net monthly income from a business, profession, or farm  | \$0                 | \$0                  |
| 6 | <b>Net income from rental and other real property</b>  |                     |                      |
|   | Gross receipts (before all deductions)   | \$0                 | \$0                  |
|   | Ordinary and necessary operating expenses  |                     |                      |
|   | Net monthly income from rental or other real property  | \$0                 | \$0                  |
| 7 | <b>Interest, dividends, and royalties</b>  | \$0                 | \$0                  |

Debtor 1 **Kodey Carvalho**

Case number, if any

|    |  |                   |                   |                     |
|----|--|-------------------|-------------------|---------------------|
| 8  | <b>Unemployment compensation</b><br>Do not enter amount if you contend that the amount received was a benefit under the Social Security Act, instead list it here.....<br><br>For you.....<br><br>For your spouse.....   | \$0<br><br>\$0    | \$0<br><br>\$0    |                     |
| 9  | <b>Pension or retirement income.</b> Do not include any amount received that was a benefit under the Social Security Act.  | \$0               | \$0               |                     |
| 10 | <b>Income from all other Sources not listed above.</b> Specify the source and amount.<br>Do not include any benefits received under the Social Security Act or payment received as a victim of a war crime, a crime against humanity, or International or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 13c.<br><br>10a.....<br>10b.....<br>10c..... | \$0<br>\$0<br>\$0 | \$0<br>\$0<br>\$0 | <b>Total Income</b> |
| 11 | <b>Calculate your total current monthly income</b> Add lines 5 through 13 for each column.<br>Then add the total for Column A to the total for Column B.   | <b>\$4,665</b>    | <b>\$3,159</b>    | <b>\$7,824</b>      |

12 **Calculate your annual income using your total current monthly income from Part 3.** Follow these steps.

12a. Copy your total current monthly income from line 11 here → 12a. \$7,824

Multiply by 12 (the number of months in a year). X 12

12b. The result in your annual income for this part of the form. **\$93,886**

13 **Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live **California**

Fill in the number of people in the household **3**

Fill in the median family income for your state and size of household.....13. **\$84,003**

To find that information, either to the Means Test Information at <http://www.justice.gov/ust/eo/bapcpa/meanstesting.htm> or ask for help at the clerk's office of the bankruptcy court.

14 **How do the lines compare?**

14a. ☒ Line 12b is less than or equal to line 16. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 5.

14b. ☐ Line 12b is more than line 16. On the top of page 1, check box 2, The presumption of abuse is determined by Form 22A-2. Go to Part 5 and fill out Form 22A-2

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x /s/ **Kodey Carvalho**x /s/ **Michelle Carvalho**Debtor 1 - **Kodey Carvalho**Debtor 2 - **Michelle Carvalho**

Dated: July 22, 2019

Dated: July 22, 2019

If you check 14a, do NOT fill out or file Official Form 22A-2. Chapter 7 Means Test Calculation.

If you checked line 14b, fill out Official Form 22A-2, Chapter 7 Means Test Calculation and file it with this form.

**Fill in this information to identify your case**Debtor 1 **Kodey Carvalho**Debtor 2  
Spouse if filing **Michelle Carvalho**United States Bankruptcy Court, **SOUTHERN** District of **CALIFORNIA**

Case Number ( if known)

☐ Check if this is an amended filing**Official Form 22A-1 Supp****Statement of Exemption from Presumption of Abuse Under § 707(b)(2)****04/16**

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 22A-1) If you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 22A-1 If you believe that this is required by U.S.C. § 707(b)(2)(C).

**Part 1: Identify the Kind of Debts You Have.**

- 1 **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.” Make sure that your answer is consistent with the “Nature of Debts” box on page one of the *Voluntary Petition* (Official Form 1)
- ☐ No Go to Form 22A-1, on the top of pag 1 of that form, check box 1, *There is no presumption of abuse* and sign Part 3. Then submit this supplement with the signed Form 22A-1
- ☐ Yes Go to Part 2.

**Part 2: Determine whether Military Service Provisions Apply to You.**

- 2 **Are you're a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?
- ☐ No. Go to line 3.
- ☐ Yes. Did you incur debts mostly while you were on active duty or while performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)
- ☐ No. Go to line 3.
- ☐ Yes. Go to Form 22A-1, on the top of page 1 of that form check box 1, *There is no presumption of abuse* and sign Part 3. Then submit supplement with the signed form 22A-1..

**3 Are you or have you been a Reservist or member of the National Guard?**

- ☐ No. Go to Part e.
- ☐ Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 1-1(d)(1); 32 U.S.C. § 901(1).
- ☐ No. Go to line 3.
- ☐ Yes. Go to Form 22A-1, on the top of page 1 of that form check box 1, *There is no presumption of abuse* and sign Part 3. Then submit supplement with the signed form 22A-1.
- ☐ **I was called to active duty after September 11, 2001,** for at least 90 days and remain on active duty
- ☐ **I was called to active duty after September 11, 2001,** for at Least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file This bankruptcy case.
- ☐ **I am performing a homeland defense activity for at least 90 Days.**
- ☐ **I performed a homeland defense activity for at least 90 days,** ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you did not check any of these categories, go to Part 3.

If you checked one of the categories, go to the top of this page. Check box 3. *The Means Test does not apply not because of qualified military service but it could not apply later*, then go to Part 5. You are not required to fill out the rest of this form during the exclusion period. The *exclusion period* means that the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2) (D)(I). If your exclusion period ends before your case is closed, you may have to file an amended form later.

**Fill in this information to identify your case**Debtor 1 **Kodey Carvalho**Debtor 2 **Michelle Carvalho**  
Spouse if filingUnited States Bankruptcy Court, **SOUTHERN** District of **CALIFORNIA****Check one only as directed in lines 1, 2, 3, or 17:**

According to the calculations required by this statement

☒ 1. There is no presumption of abuse☐ 2. There is a presumption of abuse☐ Check if this is an amended filing**Official Form 22A-2****Chapter 7 Means Test Calculation**

04/16

To fill out this form, you will need your completed copy of Form 22A-1: Chapter 7 Statement of Your Current Monthly Income (official Form 22A-1) Be as complete and accurate as possible. **If two married people are filing together, both are equally responsible for being accurate. more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).**

**Part 1: Determine Your Adjusted Income.**1. **Copy your total current monthly income**.....Copy line 11 from **Official Form 22A-1 here → 1.**

\$7,824

2. **Did you fill out Column B in Part 3 of Official Form 22A-1?**☒ No. Fill in \$0 on line 3d.☐ Yes. In your spouse filing with you?☐ No. Go to line 3.☐ Yes. Fill in \$0 on line 3d.3. **Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents.** Follow these steps:

One line 14, Column B of Form 22A-1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents:

☒ No Fill in \$0 on line 3d.☐ Yes. Fill in the information below:**State each purpose for which the income was used.**

For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents.

**Fill in the amount you are subtracting from your spouses income**

3a.

\$0

3b.

\$0

3c.

\$0

3d Total. Add lines 3a, 3b, and 3c.....

\$0

Copy total here →

\$0

4. **Adjust your current monthly income. Subtract line 3d from line 1.**

\$7,824

Debtor -1 - Kodey Carvalho

Case Number ( if known)

**The Internal Revenue Service (IRS) Issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 5-14. To find the IRS standards, either to <http://www.justice.gov/ust/ao/bapcpa/meanstesting.htm> or ask for help at the clerk's office of the bankruptcy court.**

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line e and do not deduct any operating expenses that you subtracted from income in lines 8 and 9 of Form 22A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 22A-1 is filled in.

**5. The number of people used in determining your deductions from income.**

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents who you support. This number may be different from the number of people in your household.

3

**National Standards**

You must use the IRS National Standards to answer the questions in lines 6-7.

**6. Food, clothing and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,384

**7. Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories - people who are under 65 and people who are 65 or older - because the older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

**People who are under 65 years of age.**

7a Out-of-pocket health care allowance  
Per person

\$52

7b Number of people who are under 65

3

7c Subtotal. Multiply line 7a by line 7b.

\$156

Copy line  
7c here →

\$156

**People who are 65 years of age or older.**

7d Out-of-pocket health care allowance  
Per person

\$117

7e Number of people are 65 or older

7f Subtotal. Multiply line 7d by line 7e.

\$0

Copy line  
7f here →

\$0

7g **Total.** Add lines 7c and 7f.....

\$156

Copy total here →

\$156

Debtor -1 - Kodey Carvalho

Case Number (if known)

**Local Standards**

You must use the IRS Local Standards to answer the questions in line 8-15.

**Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:**☐ **Housing and utilities - Insurance and operating expenses.**☐ **Housing and utilities - Mortgage or rent expenses.****Use the U.S. Trustee Program chart to answer the questions in lines 8-9. Go to <http://www.justice.gov/ust/eo/bapcpa/meanstesting.htm> or ask for help at the clerk's office of the bankruptcy court**

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5. Fill in the dollar amount listed for your county for insurance and operating expenses.

\$621

9. **Housing and utilities - Mortgage or rent expenses:**

- 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for you county for mortgage or rent expense.

9a

\$2,167

- 9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after your file for bankruptcy. Then divide by 60.

| Name of the creditor                | Does payment include taxes or insurance?                    | Average monthly Payment |
|-------------------------------------|---|-------------------------|
|                                     | <input type="checkbox"/> No<br><input type="checkbox"/> yes |                         |
|                                     | <input type="checkbox"/> No<br><input type="checkbox"/> yes |                         |
|                                     | <input type="checkbox"/> No<br><input type="checkbox"/> yes |                         |
| 9b. Total Average Monthly Payment + |   | \$0                     |

Copy line 9b here →

\$0

Repeat this amount on line 33a

- 9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (Mortgage or rent expense). If this amount is less than \$0, enter \$0.

9c

\$2,167

Copy line 9c here →

\$2,167

- 10 **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing does not accurately compute the amount that applies to you, fill in any additional amount you claim**

\$0

Explain why:

- 11 **Local Transportation expenses:**

- ☐ 0. Go to line 14  
☐ 1. Go to line 12.  
☒ 2 or more. Go to line 12.

- 12 **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating *Costs* that apply for your Census region or metropolitan statistical area.

\$522

Debtor -1 - Kodey Carvalho

Case Number (if known)

- 13 **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

**Vehicle 1 Describe: Vehicle 1: 2017 Toyota Rav4**

13a. Ownership or leasing costs using IRS Local Standard

13a \$497

13b. Average monthly payment for all debts secured by Vehicle 1.  
Do not include installment payments for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

| Name of each creditor for Vehicle 1 | Average Monthly payment |
|-------------------------------------|-------------------------|
| Toyota Financial                    | \$600                   |

Copy it here →

600

Repeat this amount on Line 33b.

13c. Net Vehicle 1 ownership or lease expense.  
Subtract line 13b from 13a. If this amount is less than \$0, Enter \$0

13c

(\$103)

Copy net Vehicle 1 expense here →

\$0

**Vehicle 2 Describe: Vehicle 2: 2018 Toyota Camry**

13d. Ownership or leasing costs using IRS Local Standard

\$497

13e. Average monthly payment for all debts secured by Vehicle 1.  
Do not include installment payments for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

| Name of each creditor for Vehicle 2 | Average Monthly payment |
|-------------------------------------|-------------------------|
| Toyota Financial                    | \$600                   |

Copy it

600

Repeat this amount on Line 33b.

13f. Net Vehicle 2 ownership or lease expense.  
Subtract line 13e from 13d. If this amount is less than \$0, enter \$0

13f

(\$103)

Copy net Vehicle 2 expense here →

\$0

14. **Public Transportation expense.** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation expense* allowance regardless of whether you use public transportation

\$0

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

\$0



Debtor -1 - Kodey Carvalho

Case Number ( if known)

| Other Necessary Expenses  | In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories |         |
|---|--|---------|
| 16. <b>Taxes:</b> The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate or use taxes.   |  | \$1,087 |
| 17. <b>Involuntary deductions:</b> The total monthly payoff deductions that your job requires, such as retirement contributions, union dues, and uniform costs.<br><br>Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.   |  | \$665   |
| 18. <b>Life Insurance:</b> The total monthly premiums that your pay for your term life insurance.<br><br>Do not include premiums for insurance on your dependents, for whole life, or for any other form of life insurance.   |  | \$0     |
| 19. <b>Court-ordered payments:</b> The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.<br><br>Do not include payment on past due obligations for spousal or child support. You will list these obligations in line 35.   |  | \$0     |
| 20. <b>Education:</b> The total monthly amounts that you pay for educations that is either required.:<br><input type="checkbox"/> as a condition for your job, or<br><input type="checkbox"/> for your physically or mentally challenged dependent child if no public education is available for similar services.  |  | \$0     |
| 21. <b>Childcare:</b> The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.<br><br>Do not include payments for any elementary or secondary school education.   |  | \$0     |
| 22. <b>Additional health care expenses,</b> excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.   |  | \$100   |
| 23. <b>Telecommunications services:</b> The total monthly amount that your pay for telecommunications services, such as pagers, Call waiting, caller identifications, special long distance, business internet service, and business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if not reimbursed by your employer.<br>Do not include payments for basic home telephone, internet and cell phone service. Do not include sel-employment expenses such as those reported on line 8 of Official Form 22A-1, or any amount you previously deducted. |  | \$50    |
| 24. <b>Add all of the expenses allowed under the IRS expense allowances.</b><br><br>Add lines 6 through 23.   |  | \$6,753 |

Debtor -1 - Kodey Carvalho

Case Number ( if known)

**Additional Expense Deductions**

**These are additional deductions allowed by the Means Test**  
**Note: Do not include any expense allowances listed in lines 6-24**

25. **Health Insurance, Disability Insurance, and health savings account expenses.** The monthly expenses for health insurance disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health Insurance

\$0

Disability Insurance

\$0

Health savings account

+

\$0

Total

\$0

Copy total here →

\$0

Do you actually spend this total amount?

☐ No. How much to you spend?  
☒ Yes.

\$0

26. **Continued contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your immediate family who is unable to pay for such expenses.

0

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

\$0

By Law, the court must keep the nature of these expenses confidential.

28. **Additional home energy costs.** Your home energy costs are included in your non mortgage housing and utilities allowance on line 8.  
 If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage housing and utilities allowance, then fill in the excess amount of home energy costs.  
 You must give your case trustee documentation of your actual expenses, and you must show that the e additional amount claimed is reasonable and necessary.

\$0

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$160.42\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.  
 You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\$0

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.  
 To find the maximum additional allowance, either go to <http://222.justice.gov/ust/ao/bapcpa/meanstesting.htm> or ask for help at the clerk's office of the bankruptcy court.  
 You must show that the additional amount claimed is reasonable and necessary

\$0

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. 548(d)(3) and (4).

\$0

32. **Add all of the additional expense deductions add lines 25 through 31.**

\$0

**Deductions for Debt Payment.**

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

**Average monthly payment**

**Mortgages on your home**

33a. Copy line 9b here.....

\$0

**Loans on your first two vehicles**

33b. Copy line 13b here.....

\$600

33c. Copy line 13e here.....

\$600

| Name of each creditor for other secured debt:                     | Identify property that secures the debt. | Does payment include taxes or insurance?                    |         |
|---|--|---|---------|
| 33d   |  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | \$0     |
| 33  |  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | \$0     |
| 33f.  |  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | \$0     |
| 33g Total Average monthly payment. Add lines 33a through 33f..... |  |   | \$1,200 |

**Copy total here →** **\$1,200**

34. **Are there any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?**

- ☐ No. Go to line 35.  
☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 34, to keep possession of Your property (called the cure amount). Next, divide by 60 and fill in the information below.

| Name of the creditor | Identify property that secures the debt. | Total cure amount |        | Monthly cure amount |
|----------------------|--|-------------------|--------|---------------------|
|                      |  | \$0               | ÷ 60 = | \$0                 |
|                      |  | \$0               | ÷ 60 = | \$0                 |
|                      |  | \$0               | ÷ 60 = | \$0                 |
| Total                |  |                   |        | \$0                 |

**Copy total here →** **\$0**

Debtor -1 - Kodey Carvalho

Case Number ( if known)

**35. Do you owe any priority claims - such as priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case?** 11 U.S.C. § 507.

- ☐ No. Go to line 36.
- ☒ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you Listed in line 19.

Total amount of past-due priority claims.

\$0

÷ 60=

\$0

**36. Are you eligible to file a case under Chapter 13?** 11 U.S.C. § 109(e). For more information, go to [www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyBasics/Chapter 13.aspx](http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyBasics/Chapter13.aspx)

- ☐ No. Go to line 37.
- ☒ Yes. Fill in the following information:

Projected monthly plan payment (If you were filing under Chapter 13.)

\$600

Current multiplier for your district as determined under schedule issued by The Executive Office for United States Trustees. To find this information, go to [http://www.justice.gov/ust/eo/bapcpa/meanstesting .htm](http://www.justice.gov/ust/eo/bapcpa/meanstesting.htm) or ask for help at the clerk's office of the bankruptcy court.

8.00

Average monthly administrative expense if you were filing under Chapter 13.

\$48

Copy total  
here →

\$48

**37. Add all of the deductions for debt payment.**

Add lines 33g through 36.

\$1,248

**Total Deductions from Income****38. Add all of the allowed deductions.**

Copy line 24. All of the expenses allowed under IRS expense allowances.....

\$6,753

Copy line 32. All of the additional expense deductions.....

\$0

Copy line 37. All of the Deductions for debt payment.....

\$1,248

Total deductions

\$8,001

Copy total  
here →

\$8,001

**39. Calculate monthly disposable income for 60 months.**

39a. Copy line 4, adjusted current monthly income.....

\$7,824

39b. Copy line 38. Total deductions...

\$8,001

39c. Monthly disposable income  
11 U.S.C. § 707(b)(2)  
Subtract line 39b from line 39a.

(\$177)

Copy line 38c here →

(\$177)

For the next 60  
Months (5 years)

X 60

39d. **Total.** Multiply line 39c by 60.....39d.

(\$10,601)

Copy line  
39d here →

(\$10,601)

40. Find out whether there is a presumption of abuse. Check the box that applies:

- ☒ The line 39d is less than \$7,700\*. On the top of page 1 of this form, check box 1. *There is no presumption of abuse.* Go to Part 5.
- ☐ The line 39d is more than \$12,850\*. On the top of page 1 of this form, check box 2. *There is a presumption of abuse.* You may fill out Part 4, if you claim special circumstances. Then go to Part 5.
- ☐ The line 39d is at least \$7,700\*, but not more than \$12,850. Go to line 42.

\* Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

41. 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out the *Statistical Summary of Certain Liabilities and Related Data* (Official Form 6), you may refer to line 5 at the bottom of that form.

\$38,025

X .25

41b. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 70(b)(2)(A)(i)(1)  
Multiply line 41a by 0.25.

\$9,506

Copy here→

\$9,506

42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.

Check the box that applies:

- ☒ Line 39d is less than line 41b. On the top of page 1 of this form, check box 1. *There is no presumption of abuse.* Go to Part 5.
- ☐ Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2. *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(b).

- ☐ No. Go to Part 5.
- ☒ Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for Each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income Adjustments.

Give a detailed explanation of the special circumstances:

Average monthly expense or income adjustment

\$0

\$0

\$0

\$0

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x /s/ Kodey Carvalho

Kodey Carvalho

Date: July 22, 2019

x /s/ Michelle Carvalho

Michelle Carvalho

Date: July 22, 2019

**R. Creig Greaves** (Bar #071035)

Attorney at Law

110 West "C" Street, Suite 2101

San Diego, CA 92101

(619) 234-0033

UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF CALIFORNIA  
325 West "F" Street, San Diego, CA 92101

**Kodey Carvalho**      xxx-xx-5241**Michelle Carvalho**      xxx-xx-1606

Bankruptcy No:

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF CALIFORNIA  
RIGHTS AND RESPONSIBILITIES OF CHAPTER 7 DEBTORS  
AND THEIR ATTORNEY**

In order for debtors and their attorneys to understand their rights and responsibilities in the bankruptcy process, the following terms of engagement are hereby agreed to by the parties.

Nothing in this agreement should be construed to excuse an attorney from any ethical duties or responsibilities under Federal Rule of Bankruptcy Procedure 9011 and the Local Bankruptcy Rules.

**I.****Services Included in the Initial Fee Charged**

The following are services that an attorney must provide as part of the initial fee charged for representation in a Chapter 7 Case:

1. Meet with the debtor to review the debtor's assets, liabilities, income and expenses.
2. Analyze the debtor's financial situation, and render advice to the debtor in determining whether to file a petition in bankruptcy.
3. Describe the purpose, benefits, and costs of the Chapters the debtor may file, counsel the debtor regarding the advisability of filing either a Chapter 7, 11, or 13 case, and answer the debtor's questions.
4. Advise the debtor of the requirement to attend the Section 341(a) Meeting of Creditors, and instruct the debtor as to the date, time and place of the meeting.
5. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on vehicles securing loans or leases.

6. Timely prepare, file and serve, as required, the debtor's petition, schedules, Statement of Financial Affairs, and any necessary amendments to Schedule C.
7. Provide documents pursuant to the Trustee Guidelines and any other information requested by the Chapter 7 Trustee or the Office of the United States Trustee.
8. Provide an executed copy of the Rights and Responsibilities of Chapter 7 Debtors and their Attorneys to the debtor.
9. Appear and represent the debtor at the Section 341 (a) Meeting of Creditors, and any continued meeting, except as further set out in Section II.
10. File the Certificate of Debtor Education if completed by the debtor and provided to the attorney before the case is closed.
11. Attorney shall have a continuing obligation to assist the debtor by returning telephone calls, answering questions and reviewing and sending correspondence.
12. Respond to and defend objections to claims(s) of exemption arising from attorney error(s) in Schedule C.

## **II.**

### **Services Included as Part of Chapter 7 Representation, Subject to an Additional Fee.**

The following are services, included as part of the representation of the debtor, for which the attorney may charge additional fees:

1. Representation at any continued meeting of creditors due to client's failure to appear or failure to provide required documents or acceptable identification;
2. Amendments, except that no fee shall be charged for any amendment to Schedule C that may be required as a result of attorney error;
3. Opposing Motions for Relief from Stay;
4. Reaffirmation Agreements and hearing on Reaffirmation Agreements.
5. Redemption Motions and hearings on Redemption Motions;
6. Preparing, filing, or objecting to Proof of Claims, when appropriate, and if applicable;
7. Representation in a Motion to Dismiss or Convert debtor's case;
8. Motions To Reinstate or Extend the Automatic Stay;
9. Negotiations with Chapter 7 Trustee in aid of resolving nonexempt asset, turnover or asset administration issues.

**III.**

**Additional Services Not Included in the Initial Fee Which Will Require a Separate Fee Agreement.**

The following services are not included as part of the representation in a Chapter 7 case, unless the attorney and debtor negotiate representation in these post-filing matters at mutually agreed upon terms in advance of any obligation of the attorney to render services. Unless a new fee agreement is negotiated between debtor and attorney, attorney will not be required to represent the debtor in these matters:

1. Defense of Complaint to Determine Non-Dischargeability of a Debt or filing Complaint to Determine Dischargeability of Debt;
2. Defense of a Complaint objecting to discharge;
3. Objections to Claim of Exemption, except where an objection arises due to an error on Schedule C;
4. Sheriff levy releases;
5. Section 522(f) Lien Avoidance Motions;
6. Opposing a request for, or appearing at a 2004 examination;
7. All other Motions or Applications in the case, including to Buy, Sell, or Refinance Real or other Property;
8. Motions or other proceedings to enforce the automatic stay or discharge injunction;
9. Filing or responding to an appeal.
10. An audit of the debtor's case conducted by a contract auditor pursuant to 28 U.S.C. Section 586(f).

**IV.**

**Duties and Responsibilities of the Debtor**

As the debtor filing for a Chapter 7 Bankruptcy, you must:

1. Fully disclose everything you own, lease, or otherwise believe you have a right or interest in prior to filing the case;
2. List everyone to whom you owe money, including your friends, relatives or someone you want to repay after the bankruptcy is filed;
3. Provide accurate and complete financial information;
4. Provide all requested information and documentation in a timely manner, in accordance with the Chapter 7 Trustee Guidelines;



5. Cooperate and communicate with your attorney;
6. Discuss the objectives of the case with your attorney before you file;
7. Keep the attorney updated with any changes in contact information, including email address;
8. Keep the attorney updated on any and all collection activities by any creditor, including lawsuits, judgments, garnishments, levies, and execution on debtor's property;
9. Keep the attorney updated on any changes in the household income and expenses;
10. Timely file all statutorily required tax returns;
11. Inform the attorney if there are any pending lawsuits or rights to pursue any lawsuits;
12. Appear at the Section 341(a) Meeting of Creditors, and any continued Meeting of Creditors;
13. Bring proof of social security number and government issued photo identification to the Section 341(a) Meeting of Creditors;
14. Provide date-of-filing bank statements to the attorney no later than 7 days after filing of your case;
15. Pay all required fees prior to the filing of the case;
16. Promptly pay all required fees in the event post filing fees are incurred;
17. Debtor must not direct, compel or demand their attorney to take a legal position or oppose a motion in violation of any Ethical Rule, any Rule of Professional Conduct, or Federal Rule that is not well grounded in fact or law.

Dated: July 22, 2019

/s/ Kodey Carvalho

**Kodey Carvalho**

/s/ Michelle Carvalho

**Michelle Carvalho**

Dated: July 22, 2019

/s/ R. Creig Greaves

**R. Creig Greaves**

Attorney for debtor(s).

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF CALIFORNIA**

In Re: **Kodey Carvalho Michelle Carvalho**

Bankruptcy No: \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. §329(a) and Federal Rule of Bankruptcy Procedure 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept. . . . .

\$1,500.00

Prior to the filing of this statement I have received. . . . .

\$0.00

Balance Due. . . . .

**\$1,500.00**

Balance, if any, to be paid in installments after filing.

2. The source of the compensation paid to me was: **Debtor(s)**

3. The source of compensation to be paid to me is: **Debtor(s)**

Clients are advised that fees charged for services PRIOR to the filing of your bankruptcy may be discharged in the bankruptcy. To the extent such fees are discharged, your payment(s) after the filing of your case are voluntary.

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof.

d. Other: Negotiation with secured creditor(s) in any reaffirmation agreements.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Representation of debtor(s) in any adversary proceedings or other contested bankruptcy matter.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: July 22, 2019

/s/ R. Creig Greaves

**R. Creig Greaves** (071035)

Attorney for Debtor(s)